

CHRISTMAS NUMBER. THE TIMES AND REGISTER.

A Weekly Journal of Medicine and Surgery.

Published under the auspices of the American Medical Press Association.

WILLIAM F. WAUGH, A.M., M.D., Managing Editor.

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Whole No. 641. } in advance.
Single Numbers 10 cents.

A MENSTRUUM.

HORSFORD'S ACID PHOSPHATE.

This preparation has been found especially serviceable as a menstuum for the administration of such alkaloïds as morphine, quinine and other organic bases which are usually exhibited in acid combination.

The admixture with pepsin has been introduced with advantage when indicated.

The Acid Phosphate does not disarrange the stomach, but, on the contrary, promotes in a marked degree the process of digestion.

Dr. R. S. MILES, Glencoe, Minn., says: "I use it in a great many cases as a menstuum for quinine, when an acid is necessary."

Send for descriptive circular. Physicians who wish to test it will be furnished a bottle on application, without expense, except express charges.

Prepared under the direction of Prof. E. N. HORSFORD, by the

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 CAUTION. Be sure the word "HORSFORD'S" is printed on the label. All others are spurious. Never sold in bulk.

A PHOSPHORIZED CEREBRO-SPINANT.

(FRELIGH'S TONIC.)

FORMULA.

Ten Minims of the Tonic contain the equivalents (according to the formulæ of the U. S. P. and Dispensatory) of:

Tinct. Nux Strychnos	1 minim.	Tinct. Gentian	1/4 minima.
" Ignatia Amara	1 "	" Columbo	1/4 "
" Cinchona	4 "	Phosphorous, C. P.	1-300 gr.
" Matricaria	1 "	Aromatics	2 minima.

DOSE.—Five to ten drops in two tablespoonfuls of water.

INDICATIONS.

PARALYSIS, NEURASTHENIA, SICK AND NERVOUS HEADACHE, DYSPEPSIA, EPILEPSY, LOCOMOTOR ATAXIA, INSOMNIA, DEBILITY OF OLD AGE, AND IN THE TREATMENT OF MENTAL AND NERVOUS DISEASES.

One of the most widely known physicians in the country, residing in Washington, says: "The elegance of the formula, the small dose required, and its potency go far to recommend the Tonic to the profession in that large class of neuroses so common among brain workers in this country."

A well-known physician of Chicago, in practice since 1859, says: "It will be a revelation to most physicians. I have found it peculiarly adapted to the mentally overworked public school teachers, as well as the worn-out business man."

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Over 13,000 physicians in New England and the eastern Middle States are prescribing the Tonic regularly.

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Physicians' single sample delivered, charges prepaid, on application.

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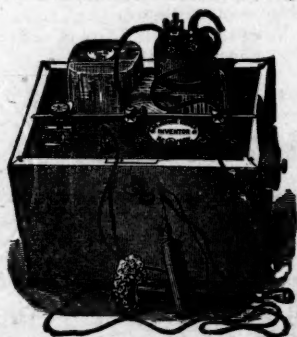
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Soluble Pancreatin.....1 Grain.	Hydrochloric Acid.....1-20 "

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It is pleasant to the Taste and
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HYDROLEINE (Hydrated Oil) is not a simple alkaline emulsion of oleum morrhuae, but a hydro-pancreatic preparation, containing acids and a small percentage of soda. Pancreatin is the digestive principle of fatty foods, and in the soluble form here used, readily converts the oleaginous material into assimilable matter; a change so necessary to the reparative process in all wasting diseases.

The following are some of the diseases in which **HYDROLEINE** is indicated:

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The principles upon which this discovery is based have been described in a treatise on "The Digestion and Assimilation of Fats in the Human Body," and "Consumption and Wasting Diseases," by two distinguished London physicians, which will be sent free on application.

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 —Pittsburg Bulletin.

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20 Instruments in all, all Nickel-Plated.

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For Nervous Prostration, Brain Exhaustion, Neurasthenia, and all forms of Mental and Physical Debility.

This WINE OF COCA is so prepared that it contains the active principle of the leaves in a perfectly pure form. Moreover, it is absolutely free from all those foreign substances which all other wines of coca contain, and which interfere, to a great extent, with its curative influence. It is well known that the cocaine contained in the coca-leaves varies considerably in its proportion; hence, giving to the wines as ordinarily made, uncertain strength, and causing them to be unreliable in their action on the system. In the RESTORATIVE WINE OF COCA the proportion of alkaloid is invariable, and the physician can, therefore, prescribe it with the certainty of obtaining uniform results.

Prof. WM. A. HANMOND, M.D., says: A wineglassful of this tonic, taken when one is exhausted and worn out, acts as a most excellent restorative; it gives a feeling of rest and relief, and there is no reaction and no subsequent depression. A general feeling of pleasantness is the result. I have discarded other wines of coca and use this alone. It produces also excellent results in cases of depression of spirits; in hysteria, headache, and in nervous troubles generally it works admirably. It is a simple remedy, yet efficacious and remarkable in its results.

R. Each pill contains the one-sixth of a grain of the Hydrochlorate of Cocaine, two grains of the Sulphate of Quinine, and two grains of Acetanilide.

"Febricide" will be found to be possessed of great curative power in Malarial Affections of any kind, and in all inflammatory disease of which Fever is an accompaniment. For Neuralgia, Muscular Pains, and Sick Headache, it is a Specific.

Prof. WM. F. WAUGH, M.D., of Philadelphia, writes: In a case of persistent neuralgic headache, worse on awakening, with a possibility of malaria, "Febricide" gave instant relief.

No. 100 W. 7th STREET, CINCINNATI, O., Nov. 9, 1899.

On November 6th I was called in consultation to see Mr. W., who was suffering from the most violent attack of ASTHMA, the paroxysm so frequent that suffocation seemed only a matter of a little time. We gave him one "FEBRICIDE Pill" and ordered one every two hours; ordered hot mustard foot-bath; his doctor remained with him. I returned per request in seven hours; to my surprise, he was breathing, talking, and, as he informed me, felt first-rate.

DR. D. W. MCCARTHY.

SPRINGVIEW, NER., November 26, 1899.

I have used your FEBRICIDE with excellent results in our Mountain Fevers (typhoid), reducing, in one case, the temperature from 104½ with dry brown furried tongue in ten hours, to 99½, with tongue cleaning promptly and moist, and rapid improvement dating therefrom. Have used Antipyrine in similar cases with no good results.

ALBERT S. WARNER, M.D.

Containing Sulphate of Soda, Carbonate of Soda, Phosphate of Soda, Chloride of Sodium, Sulphate of Lime, Sulphate of Magnesia, and Carbonate of Lithia. For Habitual Constipation, Rheumatic and Gouty Affections, Biliaryness, Corpulence, Dyspepsia, and all Derangements of the Digestive Tract, it is a wonderful remedy. Does not gripe after administration.

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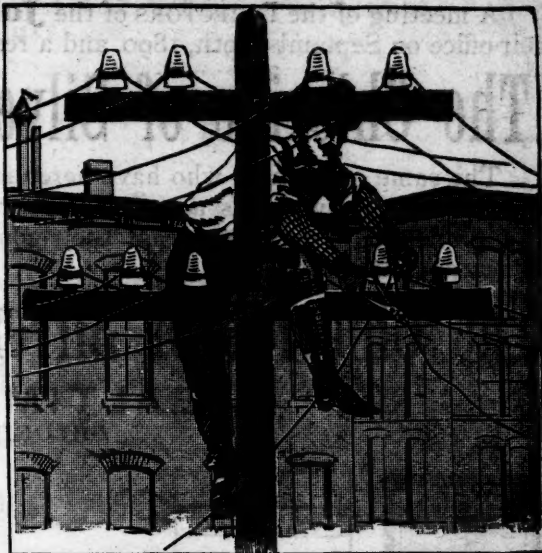
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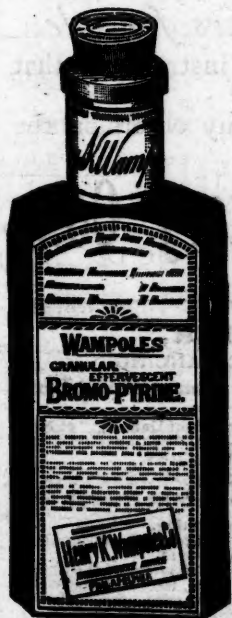
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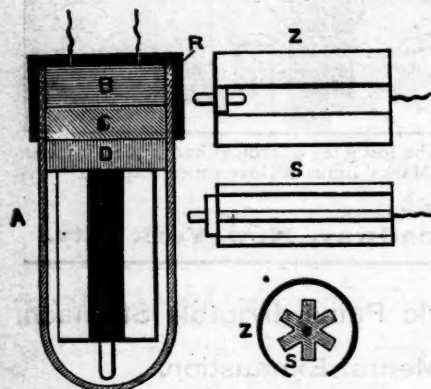
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When there is an unusual strain applied, the spring is forced back against the supporting plate and no further expansion is possible, as the belt is inelastic. This renders the TUCKER the safest of all Trusses for such emergencies, which may occur to a man at any time. There is no metallic encircling spring to rust, and no metal touching the body. The use of this Truss by men who have tried every Truss in the market, proves the TUCKER to be the most comfortable of all. It is one of the cheapest Trusses made, and when parts are worn out, they cost but a trifle to replace.

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A MICROBIC CATASTROPHE.

THE CONSEQUENCES OF TOO MUCH STUDY IN BACTERIOLOGY.

THE car was well filled as we rolled out of the depot at Jersey City, but rapidly thinned out until we reached Elizabeth, beyond which there remained but two passengers beside myself. For some time I remained buried in thought, recalling the scenes of the day and (I must acknowledge it) endeavoring to fix in my memory some of the good things said during the evening, that they might help me out on some future occasion of the same sort. Presently my attention was attracted to two of my fellow passengers, who, by a succession of smothered snorts, and now and then an irrepressible roar of laughter, seemed to have something very funny with which to regale themselves. They appeared to be two dealers from some village in the western part of Pennsylvania, who had been to the metropolis for their semi-annual stock. By degrees I made out the subject of their merriment. It seems that in their vicinity was what they called a tamarack swamp. This must be something like a quicksand, for whatever goes into it is swallowed up and is seen no more. Popular tradition considers it a bottomless pit, or at least locates the lower extremity of the swamp in a very hot climate. It had been used by the surrounding country people as a convenient dumping-ground for refuse of all sorts, from time immemorial. Quite recently a newly-chartered railroad had surveyed its route directly across the swamp, and directed the contractor to fill it up. But this was easier said than done. The engineer made his estimates, and the full quantity of earth was thrown into the swamp, but it was not filled up. Another requisition was made, and filled; the gulf yawned hungrily as at the beginning. The track could very easily have been laid around the swamp, at no additional expense, but with true corporate obstinacy the company had got its back up, and determined that across that swamp their road must go, and directed the engineers to proceed with the filling until the work was completed. The force upon duty was doubled, and the work pushed ahead with vigor. Several times they thought they had succeeded, and a firm road-bed was formed and track laid, but the next morning it had disappeared beneath the dark waters of the swamp. Five thousand carloads of rubbish had been emptied into the abyss, and the task seemed as far from completion as when first begun. The attention of the whole neighborhood was drawn to this novel contest between the railroad and the tamarack swamp. The result was vastly amusing to the country people, who, as a matter of course, took sides with the swamp against the corporation, and an immense amount of chuckling and self-felicitation took place as their predictions, that the bottom of the swamp would never be reached, seemed daily more likely to be verified.

My fellow-travelers finally quieted down, and my thoughts recurred to the principal topic of the even-

ing. If the balance created by Nature were disturbed, and the process of reproduction allowed to proceed without any obstacle, and the death of the progeny were suspended, how many microbes would there be in a week, and would Allegheny county hold them? At this point, whether lost in the immensity of my conceptions or whether the stimulating effects of the wine had evaporated I know not, but I fell asleep.

How long I had slept I cannot tell, but I was awakened by a sensation of cold. It was some time before I could recollect where I was, and when I did my bewilderment was scarcely lessened. I had fallen asleep in an ordinary parlor-car, but the one which I was in did not resemble it in the least. The richly-upholstered couches and the beautiful woodwork had disappeared. I was lying on a lounge so thickly wrapped in furs that I could scarcely move. My feet were in close proximity to a stove which occupied the center of the car. Roof, floor, and sides were thickly hung with furs, which seemed to press down upon me with smothering force. One small window of thick but beautifully transparent glass remained, and the draught from this seemed to chill the marrow of my bones. Glancing through it I could see that we were going at a fearful rate. Huge, shapeless masses shot by like meteors. The country through which we were passing was a waste of ice and snow. No sign of human life was visible; not a tree or bush enlivened the landscape. Chaotic masses of rock broke through the snowy covering of the plains, but rather added to than detracted from the desolation of the scene. In the distance the majestic forms of great icebergs sailed by, slowly, yet withal swiftly enough to show at what a terrific rate we were traveling. Through all this desolation it was somewhat reassuring to see the moon looking quietly down upon me,—looking just as she always did, but brighter than I had ever noticed her before. But—what! Surely I went to sleep in Jersey, and here is the Pole Star almost directly over my head!

While cogitating on what this new phenomenon might signify, the door of the car suddenly flew open, and with a freezing blast in staggered the most singular looking creature. He was a boy about ten years old, but so gaunt and withered that he looked like an old man. He was wrapped in many layers of ragged garments of sombre hues. His head was covered by a tangled mass of uncombed locks, over which was tightly drawn a uniform cap. His grimy face bore the traces of tears, but these had ceased, and his large dark eyes bore no expression but that of dull despair. He was passing mechanically through the car without seeming to notice me, when, feeling as if my brain would become unsettled if I could not get some conception of what all this meant, I stopped him.

"Who and what are you?" said I. He raised his eyes to me with a momentary gleam of intelligence, and said in a dull, listless voice, "I am the last news-boy, and here is the last newspaper." And so saying he laid a paper on my lap, and sank down on the floor in front of the fire. I looked at the

paper. It was printed on a sheet of common whitey-brown wrapping paper, and from its general appearance it flashed upon my mind that it was the last despairing work of a man whose hand fell nerveless as the press made its last impression. There were no headings, no advertisements, no paragraphs. It was printed in one continuous form, and in fact looked more like a leaf torn from a book. It read as follows:

"The awful catastrophe which has come upon the world is so singular that even now, when the period of the higher forms of animate nature is about to be completed by their total extinction, we cannot help acknowledging that by no human forethought could the calamity have been avoided. It has been only during the present century that the existence of the minuter forms of life were discovered. Only during the last decade did the improvements in the microscope render the discoveries of Pasteur and Koch possible. And yet, when the scientific world had opened its eyes to the truth, the possibility of this frightful accident was lost in its overwhelming impossibility.

"To recapitulate facts which are now but too well known by all: Among the microbes recently discovered, whose sphere consists in bringing destruction upon higher organisms, the bacterium of glanders stood pre-eminent. It was the smallest of all. It multiplied with amazing rapidity. It gathered new intensity when allowed to work under favorable conditions, acquiring increased vigor with every development of new broods. If a full supply of material for growth could be obtained, and no injurious conditions existed, a single microbe would in two days be represented by two hundred and eighty-one

trillions of its kind. But so remote was the chance of such conditions being ever presented that the imagination of Verne never compassed it. Nor would it have been presented had not an illiterate farmer in the West been impelled by sad fate to cast into the tamarack swamp the body of a horse which had died of glanders. So seemingly inconsequential was the act which destroyed the world! Here was a carcass containing billions of these microbes; and the swamp afforded a limitless matrix in which they could multiply without a single unfavorable condition. The decaying organic matter which had for ages formed and sunk into the depths of the swamp supplied the material for growth.

"The result was quickly manifest. The men who were engaged in constructing a road-bed across the swamp found their labors unexpectedly brought to an end. The swamp was filled at last, the rails laid, and the directors in a special train rode over it in triumph. But that was the only train which ever passed over that fatal swamp. The next one ran off the track, and on examination the road bed was found to be lifted up a foot above the level. The engineers were blamed, and ordered to lower the tracks. But when the workmen came to do this they found the tracks several feet in the air, and in a week a lofty hill uplifted itself upon the site of the unlucky swamp. Nothing daunted, the mulish board ordered their men to tunnel the hill. One day, when an unusually large blast of dynamite had been exploded, the workmen found a new enemy to contend with. From every crack and crevice of the quaking, tottering hill there oozed masses of a singular substance resembling the "mother" of a vinegar barrel. The hill rose higher daily until it overtopped the neigh-

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boring summits. The curious came from all sides to see the new wonder. The mother-like masses poured out until they covered the hill and commenced to overflow upon the surrounding farms. People began to grow anxious concerning it, especially when a commission sent by the government announced the true nature of the phenomenon. The hill grew to a mountain, and down every ravine which rent its sides streamed rivers of slimy matter, which spread over the plains below. Those who last ventured near enough to view the site of the fateful swamp saw a terrific sight. It was converted into a furious volcano which vomited forth, with momentarily increasing power, masses of vital, living beings, countless tons upon tons of microbes. Every obstacle was overcome in its course. Trees, rocks, rivers served but as food for the relentless creatures, whose powers were so greatly increased by unrestricted development that no object, animate or inanimate, could withstand their destructive attacks. Far and wide the floods of this new deluge rolled their unebbing tides. First the farms in the immediate vicinity were covered; then the whole country; then it rolled down the river, ever spreading, until the whole Ohio valley was overwhelmed. Many hoped that the flood would pour down the Mississippi and be lost in the Gulf. But this outlet was insufficient for the ever-increasing flood, and from every gap in the Alleghenies, nay, over every mountain top, it pours down towards the ocean. Faster and faster it spreads. America is lost. The Atlantic is thick with microbes, the world is gone, and the only question now left for humanity to settle is whether the all-conquering bacillus can withstand the cold of the Poles."

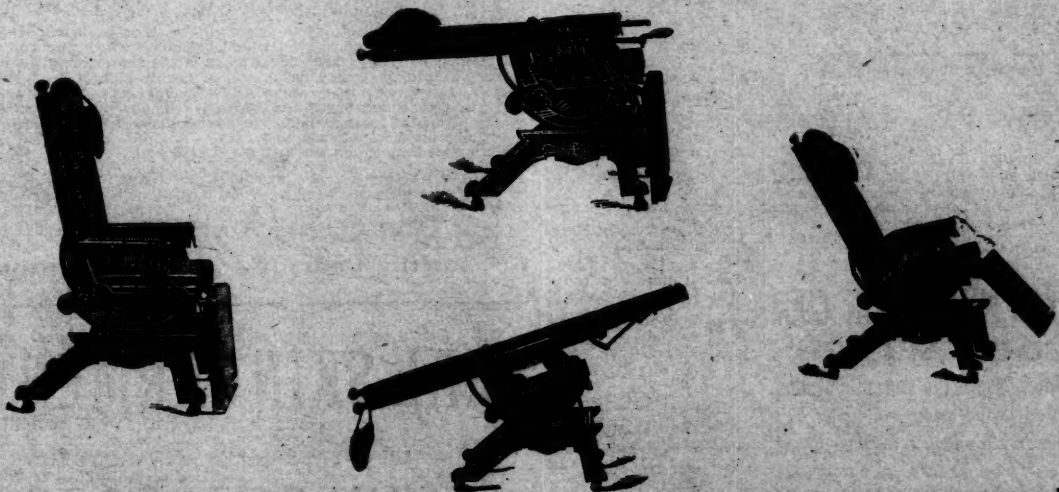
I dropped the paper from my palsied hands. The last traveler on the last train, I was flying North! Hurrying, skurrying, speeding North! Flying at lightning speed! From what? Was I pursued? Above the noise of the flying train I could hear a sullen roar, growing momentarily louder. I looked out the window at the rear end of the car, and by the light of the setting moon and the stars shining with unearthly brilliancy from the inky sky I could see the southern horizon occupied by a far-reaching yellow wall. Far as the eye could pierce it ran from right to left, towering up and swiftly rolling with thunderous roar, full down upon the fated train.

It speeds along! Faster, faster flies the shrieking train! Nearer, nearer sweeps the terrific deluge! Higher it rears its tawny front! A furious storm of hail and snow arises. Boreas awakes; resents the invasion of his icy realm, and all his Arctic hosts he hurls upon the foe! Up! Titans! Niblungs bold, and all ye powers dread whose giant forms loom vast and terrible in the dim northern mists! Briareus, ply thy hundred arms! Thor, wield thy hammer as of old; and all ye heroes in Valhalla's halls, to battle once again! For Lok, the Destroyer, comes, and the last fell fray is on!

Through the thick hurtling sleet the train with difficulty plows its way. The yellow wall looms up behind us. Torn and rent by the furious blasts, it is tossed into a thousand terrific shapes. Still on it comes. Higher and higher it piles, till half the heavens are blotted out. Demon faces gleam out on every side, and snaky arms fling out and up and down. The howling of the tempest grows louder as it momentarily checks the onrolling wave, which

—THE— "PERFECTION" CHAIR.

==== SEND FOR CIRCULAR. =====



THIS IS THE BEST CHAIR MADE.

E. A. YARNALL CO.,

1020 WALNUT ST., PHILADELPHIA,

Manufacturer of SURGICAL INSTRUMENTS.

roars again in wrath, drowning the groans of the laboring train. Once more the foes gather for the onset. They form in one vast mass, piling up mountain high, coming with resistless force. Boreas is beaten back! The train stops. Over our heads the mass impends; it is on the brink of falling. It falls in avalanches, overwhelming us in its billows—the car is crushed—I

"Help! I'm smothering! Hello! Gosh!"

The last exclamation was called forth by a souse of ice water over my devoted head, which effectually recalled my senses to their proper habitat. I found myself floundering on the floor, vainly endeavoring to free myself from the superincumbent weight of an old and obese lady, who was making the welkin ring with her shrill screams. When quiet was restored I found that the aged party, who had boarded the train after I had fallen asleep, had visited the end of the car in search of a glass of ice water. Not finding it she had sent the porter to another car for her drink, and just as he was in the act of handing her the cup a sudden lurch of the car precipitated her upon my devoted form, overwhelming me at once. In her fall she wildly clutched at the porter's arm, and hence the deluge of ice water upon my head.

However, apologies were duly tendered, damages repaired, and by the time we rolled into the Broad street depôt the ancient dame and I were firm friends.

After maturely deliberating upon the occurrence I have come to the conclusion that in something I had taken during the evening there were some of the specific bacteria of nightmare.

MIKE ROBY.

FRENCH, RICHARDS & Co. are winding up their affairs and going out of business.

POLYCLINIC

Syrup Hypophosphites Comp. Improved

FORMULA—Each drachm contains:

Calcii Chloridi.....gr. iij	Sodii Hypophosphite.....gr. iss
Ferri Lactas.....gr. ss	Manganesii Hypophosphite.....gr. ss
Magnesi Hypophosphite.....gr. j	Quiniue Mur.....gr. ss
Ammonii Hypophosphite.....gr. ss	Strychnia(Alk)gr. 1-200
Potassi Hypophosphite.....gr. ss	Ac. Hypophosphorous.....gr. 1-200

This formula is used by the Philadelphia Polyclinic with considerable favor, and contains ALL THE VALUE OF HYPOPHOSPHITES. What we claim for the above is the reliability of the Preparation, and superior Pharmaceutical skill in its manufacture. Would be pleased to furnish samples to physicians upon request. When prescribing please specify

WATT & LEEDOM'S.

VIN ERYTHROXYLON COCA

* COCA WINE *

Nerve tonic. Tones the muscular system.

The Coca Wine manufactured by us is probably the best Nerve Tonic known. It tones the nerves, strengthens the muscles, aids digestion, and relieves fatigue.

Dose for an adult, one or two tablespoonfuls between or after meals—as desired.

Samples to physicians.

Please specify WATT & LEEDOM'S.

Manufactured by

WATT & LEEDOM,

Dispensing Chemists and Manufacturers of Fine Pharmaceutical and Toilet Preparations.

1403 FILBERT ST.,
(Broad and Filbert),

PHILADELPHIA.

Pharmaceutical

Specialties.

Elix. Guarana et Apil
(Guarana and Celery).

Elix. Guarana, Apil cum
Erythroxylon
(Elix. Guarana, Celery with
Coca).

Elix. Gentiana et Tr. Ferri
Chlor. (Tasteless)
(Elix. of Gentian and Taste-
less Tr. Chloride of Iron).

Elixir Catharticus ("Aloin
et Nux Vom.")
(Cathartic Elixir contain-
ing Aloin and Nux Vom-
ica).

Elixir Calisaya Bark.

Elixir Quinine, Ferri et
Strychnine
(Elix. Iron, Quinine and
Strychnine).

Elix. Ammonia Valer.
(Elix. Valeriate of Am-
monia).

Vin. Ferri cum Cibo
(Beef, Wine and Iron).

Elix. Yerba Santa.

DR. BRUSSTAR, of the Lazaretto, was badly injured by being thrown from his carriage last week, and is lying very low.

OUR next number will be additionally interesting as it will contain a *denouement* of the so-called "Mas-sage and Baths" institutions of Philadelphia.

DR. DONNEL HUGHES returned to Philadelphia from Berlin, on December 18, where he has been studying the results of Dr. Robert Koch's treatment for tuberculosis. An exceedingly interesting report from him will appear in the next issue of THE TIMES AND REGISTER.

THE official experiments with Dr. Koch's lymph for the cure of tubercular troubles by the University Tuberculosis Commission began last Thursday. A final examination of the six cases in the hospital, which have been under observation for some time, was made on Tuesday, and five of the patients rejected as not being of the proper nature from which to expect good results.

A man presented himself who was evidently suffering from tuberculosis of the knee-joint, and was what is known as a "surgical case." He was examined carefully by the commissioners, and upon him and the other patient, who has been in the hospital and was considered a good case, the first experiments will be made. The patients will be subjected to no special treatment previously, and will only be the subjects of close observation.

There are now beds enough in the wing of the hospital, set apart for the experiments, to accommodate thirty patients, and all who present themselves and are good cases will be admitted.

Instruction in Massage.

A Course of LESSONS in MASSAGE and the simpler SWEDISH MOVEMENTS will begin at the Movement Cure Hall of Dr. BENJAMIN LEE, 1532 Pine Street, Philadelphia,

on Monday, January 5, 1891, at 2.30 P.M.

The course will extend over a period of two months, attendance daily (except Sundays), from 2.30 to 3.30 P.M. Classes will be limited to six. It is desirable that two acquaintances of the same sex should apply together, in order that they may perform the manipulations upon each other. The practical instruction will be given by a graduate of the Medico-Gymnastic Institute at Lund, Sweden. Applicants, other than physicians or medical matriculates, must present a certificate of good moral character from a respectable physician. The following text-books are recommended in connection with the course:

DUNGLISON'S New School Physiology and Hygiene. CUTTER'S First Book on Anatomy, Physiology, and Hygiene. The Theory and Practice of the Movement Cure, by GEO. F. TAYLOR. A.M., M.D. A Practical Treatise on Massage, by DOUGLAS GRAHAM, M.D. LEE'S Reibmayr's Art of Massage, Tracts I., II., and III.

Fee for the Course, \$100.00

SEAL SKIN GARMENTS

IN ALL STYLES, SIZES AND LENGTHS.

SHOULDER CAPES

OF EVERY DESCRIPTION.

SHERMAN,

HATTER AND FURRIER,

1017 Chestnut Street.

THE Board of Health last Tuesday began business in its new quarters in the City Hall, rooms on the fifth, sixth, and seventh floors, east corridor, having been set aside for the Bureau. All the rooms are furnished in antique oak, in conformity with the other rooms in the building.

THERE is a general impression that when a woman devotes herself to professional pursuits, she becomes indifferent to her personal appearance. Nothing is farther from the truth. To take an extreme instance; Dr. Clara Marshall attends to her private practice and to the duties of her office as Dean of the Woman's Medical College, and still finds time to dress as becomingly as any of her sisters whose minds are altogether absorbed by dry goods.

THE NEW HOSPITAL OF THE PHILADELPHIA POLYCLINIC.—The Philadelphia Polyclinic will move into its new building on Lombard street, near Eighteenth street, on December 22. The profession will be given an early opportunity to inspect the new hospital, which embodies in its main plan and arrangement of details the most advanced ideas in hospital construction. The Bazaar recently held by the Ladies' Aid Society of the Hospital netted something less than two thousand dollars, the unfortunate weather of the first day having interfered with the attendance. The State Board of Charities has recommended to the Legislature an appropriation of forty thousand dollars for the Polyclinic Hospital. With the new year, teaching in the new building will be in full operation and several new chairs will be created.

WEEKLY Report of Interments in Philadelphia, December 6 to December 13, 1890:

CAUSES OF DEATH.		Adults.	Minors.	CAUSES OF DEATH.		Adults.	Minors.
Abscess.....	2			Inflammation brain.....	1	7	
Alcoholism.....	3			" " bronchi.....	1	6	10
Aneurism of the aorta.....	1			" " bladder.....	1	2	5
Asphyxia.....	2			" " kidneys.....	1	1	1
Apoplexy.....	15			" " larynx.....	1	2	1
Bright's disease.....	10	2		" " liver.....	16	18	
Burns and scalds.....	1			" " lungs.....	1	1	
Cancer.....	11			" " pericardium.....	1	1	
Casualties.....	8			" " peritoneum.....	1	1	
Congestion of the brain.....	1			" " s. & bowels.....	1	3	
" " lungs.....	4			Inanition.....	1	3	
Chorea.....	1			Intussusception.....	1	1	
Consumption of the lungs.....	53			Jaundice.....	1	1	
Collapse of lungs.....	1			Marasmus.....	1	4	
Convulsions.....	1	17		Measles.....	1	1	
Croup.....	10			Old age.....	16	16	
Cyanosis.....	5			Obstruction of the bowels.....	1	1	
Drowned.....	1			Paralysis.....	2	7	
Debility.....	2	5		Poisoning, opium.....	2	2	
Diabetes.....	1			Purpura hemorrhagica.....	1	1	
Diphtheria.....	22			Rheumatism.....	2	1	
Disease of the brain.....	1			Scrofula.....	2	2	
Disease of the heart.....	27	6		Septicemia.....	2	2	
Disease of the liver.....	2			Softening of the brain.....	1	1	
Dysentery.....	1			Suffocation.....	1	1	
Effusion of brain.....	1			Suicide, illuminating gas.....	1	1	
Epilepsy.....	1			" " wounds.....	1	1	
Erysipelas.....	1			Syphilis.....	1	1	
Fever, scarlet.....	4			Tapes mesenterica.....	1	2	
" " typhoid.....	8	10		Tumor.....	2	2	
Fracture of femur.....	1			Ulceration of the bowels.....	1	1	
Gangrene of the leg.....	1			Uremia.....	1	1	
Hemorrhage.....	6			Whooping-cough.....	1	3	
Homicide.....	1			Total.....	245	156	

MRS. MCFADDEN: "I'm very queer again, doctor. My cough bothers me so; I'm afraid I'm going to die."

Genial Medical Person: "Never mind, it's not a very difficult thing to do. The last year of our life is much easier than the first. You see, there's no teething."

OFFICES TO RENT:

1635 Arch St.

Parlors to rent to Physician or Dentist. Open grate in back parlor.

A NUMBER of new advertisements will be found in this number, especially in the city supplement. We have two rules governing us in the matter of advertisements: 1. We never ask for one unless we believe the advertiser will find it profitable to take the space in our journal. 2. We apply for advertising in any line to the parties we consider the best; or where we have special reasons for believing that our readers will be suited. For instance, as regards these new advertisements: The issue of our special city editions, going to every physician and druggist in this city, opens up a medium for local trade never previously offered. Three thousand copies circulated in this city and vicinity, gives a reading circle larger than that of many dailies.

The pains taken in the selection of advertisements can scarcely be comprehended by those who think a journal will advertise anything that will be paid for. In all cases, we look to the interest of our readers. For instance: Watt & Leedom advertise an improved Polyclinic Hypophosphite syrup, and a coca wine. The syrup is clearer and better gotten up than that made by the Polyclinic pharmacist; while as to the coca wine, the writer took the trouble to descend into Mr. Leedom's cellar and inspect the casks of Montilla sherry, noting the importation labels, to verify the firm's statements as to the superior quality of the wine employed.

As to Mr. Wimley, our reason for tendering him the use of our pages, was that he has for years catered to the Medico-Legal Society, with such acceptability that the society voted him a handsome testimonial, with their thanks. This is but a beginning; and we hope to make the advertising pages of the Philadelphia editions both useful and interesting to our readers. There are many pharmacists in this city, the most intelligent and skilful in the world; and many of them have special preparations on which they pride themselves. It is our desire to bring these products before a public that will appreciate their merits, and these will be specially welcome to our pages.

DR. ERNEST B. SANGREE, Demonstrator of Histology at the Medico-Chirurgical College, was married, on Tuesday last, to Miss Ella Mann Russell, of Philadelphia.

A COFFEE HOUSE, with pretty waitresses, has opened in Berlin, bearing over its portals a sign consisting of Koch's portrait, with the inscription, "The Jolly Bacillus."

A PROLONGED search through the wholesale and retail drug stores of Philadelphia for orexin has failed completely. We believe the drug cannot be obtained, except in New York.

A favorite method with the manufacturer is to send a sample fiend to interview the busy doctor. Then, when he has tried the sample and got good results, the article cannot be found. The druggist applies to the doctor, who orders something else, and the sample is forgotten. If it is worth while to go to the expense of sampling a city, it is surely worth while to insert an advertisement in the local journals, so that the doctors may know where to get the articles.

BUY YOUR ICE CREAM AND CAKES FOR THE HOLIDAYS

At H. B. WIMLEY'S, Caterer, 1604 N. Broad St.

Having the best facilities for Catering in Philadelphia, we can supply for festivities of any nature the most elegant furnishings, having spent a large sum of money in Royal Worcester and Haviland Decorated China, Cut Glass, fine Imported Table Linens, Silver and Candelabras.

No expense spared in the service given to my patrons, thereby avoiding the confusion attending large assemblages.

A neat appearance and polite service characterize our waiters. Estimates cheerfully given, and orders appreciated.

DR. JAMES FARRAR STONE gave a reception to the leading physicians of Philadelphia last week on the occasion of opening to their inspection the new Gymnasium and Physical Training School for Women and Children, which he has established at 1808 Green street. A large number were present, and addresses were made, endorsing the aim of the school, by Dr. Wm. G. Anderson, Director of Physical Training of the Adelphi Academy, Brooklyn, and also of the Chataqua Summer School, and by Dr. Harrison Allen, of this City. Letters of approval were read from Dr. Weir Mitchell, and from Provost Pepper, of the University, who had expected to be present to speak.

In welcoming the profession to the gymnasium Dr. Stone explained that appeal was made to them, in inaugurating this undertaking, rather than to the public, because of their intelligent appreciation of every attempt, however modest, to augment those forces which contribute toward the diminution and prevention of diseases. Accepting their presence as evidence of their belief that judicious physical training, under constant medical supervision, is an important hygienic and therapeutic factor.

A tender was made to the profession of the gymnasium, with its facilities, apparatus, and skilled instruction, to use as if it were their own, stating that every physician, who so desired, may have free access to the classes, direction of the lectures, and sole control of such pupils as he may bring to the institution.

The building devoted to the gymnasium is constructed on the most approved plans, is well lighted,

well ventilated, and furnished with the best appliances. It is covered by a flat roof, solidly constructed, paved with asphalt, and surrounded by a brick parapet, where open air exercises can be conducted in suitable weather.

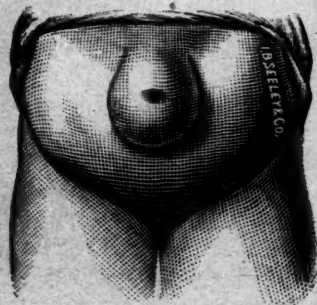
It is a gymnasium, but not in the popular sense, not for the training of athletes, nor specially for the decrepit and deformed, but a school for the body, a school for the normal development of every organ. The condition of the heart and lungs, and the effects on these and other vital organs is the basis and regulator of all the training, and no use of the apparatus is permitted, except after physical examination and under constant supervision.

The exercises are graded by scientific system directed to develop the whole body symmetrically, use being made of the Swedish educational system of Peter Henry Ling, the Delsarte system, games, and the deep breathing exercises of Miss Allen, of Boston. Physicians interested are invited to call at any time.

DR. ALBERT P. BRUBAKER has been appointed by the Trustees of Jefferson College to deliver the lectures on Materia Medica for the remainder of the present term. Dr. Brubaker was formerly associated with Drs. Shoemaker and Vanderbeck in a quiz at Jefferson; and has since been Demonstrator of Experimental Physiology at that school, and Professor of Physiology at the Pennsylvania Dental College. He is very popular with the students at Jefferson, and his appointment was the result of a petition signed by nearly the entire class.

THE MECHANICAL TREATMENT OF UMBILICAL HERNIA AND CORPULENCY.

WHEN the physical inconvenience and suffering occasioned by Umbilical Hernia is considered, and the fact that in the corpulent adult it cannot be cured by any means, it is a matter of regret that more attention is not given to its prevention. When it is remembered how liable is strangulation, and how disastrous are most of the operations that are performed for its relief, it is hardly possible to lay too much stress upon the importance of proper treatment and protection. The use of our Elastic Abdominal Belts by persons of corpulent tendencies, while relieving other ailments the result of corpulency, will prevent Umbilical Hernia. In nearly every person suffering from Umbilical Hernia the flabby condition of the adipose tissues of the abdomen have a tendency to move the truss out of position; therefore the entire abdomen should be supported by a properly-fitted Elastic Abdominal Belt, combined with an Umbilical Truss. In such cases, neither the truss nor the belt alone can be relied upon; yet, when combined, they will securely retain the Hernia, and afford a firm support to the abdomen, invariably diminishing its size. "No truss that does not combine these qualities can be considered, under such circumstances, as of much value; for, although a radical cure can seldom be effected in any case, there is hardly



a tumor, however large, inconvenient, or painful, that may not be materially relieved by these means."—"Gross' Surgery," Vol. II, page 560. Plates of some of our appliances for Umbilical Hernia may be seen in "Agnew's Surgery," Vol. I, page 499, and, also, "Gross' Surgery," as above, where they were first shown to the public. This should be sufficient proof of their adaptability and efficiency. For thirty years we have made the Mechanical Treatment of Hernia or Rupture a Specialty, under patronage and endorsement of the most eminent surgeons of the world, to whom we feel privileged to refer. During that time we have treated successfully over 100,000 cases of Rupture, in all of its different and complicated forms, without a failure. This practical experience gives us a knowledge of what is best suited to each individual



case, and we guarantee to furnish and adapt such a truss as will enable any person suffering from Rupture of whatever kind or condition to perform his or her duties with comfort and safety, and to cure permanently all curable cases. No worthy person need suffer the want of best attention; as our prices are within the reach of all.

Twenty-five Years' References.—Professors S. D. Gross, D. Hayes Agnew, Willard Parker, W. H. Pancoast, Dr. Thomas G. Morton, and Surgeon Generals United States Army and Navy.

ELASTIC STOCKINGS, KNEE CAPS, ANKLETS, ABDOMINAL BELTS.

Their value depends largely upon the quality and freshness of the rubber. We have conveniences for executing at short notice orders for goods made to measure. Our extensive experience in the fitting of these goods enables us to meet the requirements in all cases, and to impart valuable advice, while our large trade insures fresh, reliable goods at the lowest prices.

Our Illustrated Catalogue and Price List to physicians mailed on application.

I. B. SEELEY & CO., 25 S. ELEVENTH ST., Philadelphia, Pa.

Apartment for Ladies, in charge of competent Lady Assistant.

AN exceedingly delicate operation, recently performed in one of our city hospitals by a leading surgeon, has, strangely enough, escaped the notice of the influential and usually wide-awake journalists of the city.

A man presented himself at the clinic complaining of pain in the right thigh. An examination showed a rounded, firm tumor, about two inches in diameter, of a dusky red color and malignant aspect, and exceedingly tender to the touch. Everything was prepared for the grave operation necessitated. The skin was washed with antiseptic lotions, and shaved. The surgeon and his assistants likewise submitted their hands to a like purifying process. One assistant was told off to administer ether; another to hand instruments to the operator; a third to sponge; a fourth stood by with appliances to secure any vessel that might be severed; a fifth held in his hands the electrodes of an electric battery, ready to apply them if the respiration should fail; a sixth held a towel, to wipe the perspiration from the operator's face; a seventh held a bottle of smelling salts, to be used in case the operator should become faint; while four others acted as general utility men, and stood ready to take the place of any who should become exhausted.

All being in readiness, the operation was begun. Taking an instrument with a sickle-shaped blade, he plunged it into the swelling, and, with one long, sweeping cut, laid it open through its whole extent. Dropping the knife, he quickly applied his thumbs to both sides of the incision, and firmly applied compression. Quantities of thick, yellow pus gushed out over the surgeon's hands. The compression was continued relentlessly until the reddening tint of the fluid indicated the presence of blood. A stream of warm water was then allowed to play into the gaping orifice until the water returned clear. The wound was then carefully dried, and the most approved dressing applied. As the word was given to allow the patient to emerge from the anæsthesia, the operator fell back, exhausted by the terrible strain upon his nerves. Stimulants were liberally administered, and at last accounts he was as comfortable as could be expected. The tumor proved to be of the very rare growth known as chioli. A cure is confidently expected, although the disease is apt to recur.

ACROSS THE CONTINENT.—Nothing shows the marvelous development of this great country of ours so plainly as the rapid progress made in railroading. Sometimes railroads go ahead of civilization. Sometimes they follow the pioneer; but the improvements

in methods and luxury of transportation are altogether marvelous when you sit down and think of them. The subject is brought forcibly to mind by the announcement of arrangements made by the Pennsylvania Railroad for transcontinental excursions, which embrace not only the scenic features of the Rockies along the line of the Denver and Rio Grande, but the far South, the far North, tapped by the Northern Pacific, and almost the entire length of the Pacific slope.—*Phila. Inquirer*.

YELLS.—To the casual observer, happening into our college during the progress of a lecture, and departing before its conclusion, must come the impression that medical students are quiet, energetic, studious young men, who never make a noise in going to or from college; but let the same observer stroll into our hallway shortly before or immediately after a lecture, and the following will cause him to alter his opinion, and also, perhaps, to consult a specialist on the condition of his hearing apparatus, for from the seniors he will hear:

Ra Rah Run! Ra Rah Run!
Medico-Chi-Chi Ninety-one.

The juniors will next greet him with:

Ra Rah Boo! Ra Rah Boo!
Medico-Chi-Chi Ninety-two.

To which our freshmen reply:

M. C. C! M. C. C!
Medico-Chi-Chi Ninety-three.

By this time he will have reached the street, and as the students of the different classes intermingle on their way home the air is ringing with:

Hi! Hi! Hi!
We cry! We cry!
Medico-Chi-Chi.

If he lingers for a moment longer, he hears the ringing of another bell, and soon the cry of:

Who are we? Who are we?
Philadelphia Dental College.
P—D—C.

—*Med. Chi. Bulletin*.

FOR sale or to rent on very easy terms, to any responsible purchaser, but well calculated for a physician or druggist, or for a private hospital, the very superior, modern and privately-built residence, N. E. cor. of Seventeenth and Jefferson Streets, Philadelphia, Pa., in the best built-up section of the city; with 14 rooms, 2 bath-rooms, etc.; heated by Gold's Patent Steam Heater and open grates, with best cooking range; electric wires through house; two fronts; shade trees; and occupied for many years by a physician, who has removed to 1616 Chestnut Street, Phila., and will be reached by any inquiry addressed thereto. G. E. B.

THE

HENRY F. MILLER

PIANO

The favorite with musicians,
and a Piano that has gained

GREAT FAME

On account of its wonderful
musical tone, quality of tone,
and unsurpassed durability in
the homes of music lovers.

MANUFACTURERS' WAREHOUSES OF

HENRY F. MILLER & SONS PIANO CO.,

1428 CHESTNUT ST.,

Association Building.

OUR GYNECOLOGISTS.

I bring you a garland of rich flowers, and rare;
A chaplet of branches that none can compare;
That sprung from the brambles of earth's dreary waste,
Which by culture and training have become the 'most chaste.

The rose of McDowell, all pure in its scent,
Far-reaching in fragrance, it makes a great rent
In the rock of strong prejudice, that opens in glee
To grow forth a lily, now called an Atlee.

The lily was white, in soil heretofore barren,
Though effort was made to make it look marron—
Through the eyes of this monster, where ignorance swells—
But opened to truth when watered by Wells.

The lily now showed its pure white on the heath,
For a husbandman came in the person of Keith,
Who nurtured the soil, and, true to its fate,
Sprang full to its bounty and gave us a Tait.

The lambent air now with incense laden,
Ope'd wide the nose of a sweet maiden,
Who breathed and drank of the gentle smell,
And pregnant was with a Goodell.

Now all the world these flowers grow,
The soil is changed and all do sow,
And odors sweet spring from the belly,
When disinfected by the hands of Kelly.

—Wilson Buckby, M.D.

FOR SALE. Jeancon's "Pathological Anatomy." Royal Folio, 14x22—100 pp. text, 100 pp. plates, formerly \$30.00, reduce to \$20.00, on installments. Also "Diseases of the Sexual Organs." Half morocco, 80 pp. plates, 160 pp. text—same price. Mention "Times and Register."

DR. JOHN K. SCUDDER, 228 W. Court St., Cincinnati, O.

I want a good reliable physician to take charge of my business for a few weeks during February and March, will sell if you like it here, town of 1200; village of 300; one minute from Railroad, Post Office, Church, School. State age; married or single. Address, R. W. E. ALCOTT, Avon, Conn.

Lombard Investment Company,

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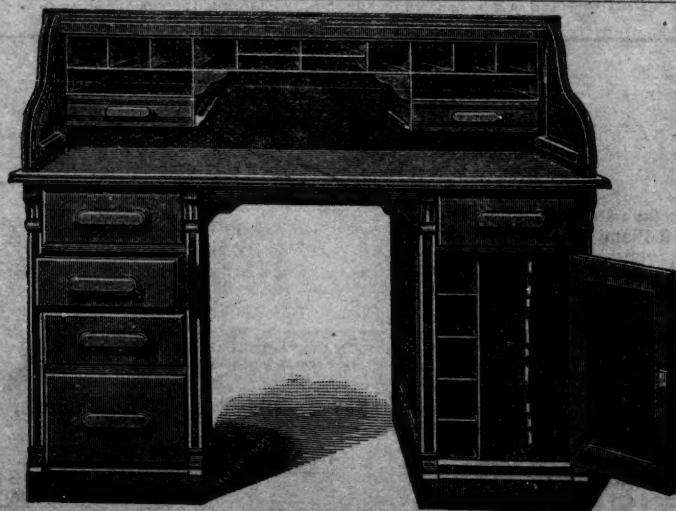
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PYÆMIA AND THROMBOSIS OF INTERNAL JUGULAR VEIN FROM AN OLD OTITIS MEDIA.—LIGATION OF INTERNAL JUGULAR VEIN.—TREPHINING OF MASTOID.—OPENING OF LATERAL SINUS.—DEATH.

By W. W. KEEN, M.D.,

Professor Principles of Surgery, Jefferson Medical College, Philadelphia.

C. S., aged thirty-one years, letter carrier, married. I first saw him November 16, 1890, at the request of Dr. Jas. F. Berlet.

For the last seven or eight years he has had a slight discharge from the right ear, apparently from cold. Has never had measles or scarlet fever. Has been slightly deaf in right ear.

Annoyed by the discharge, five months ago he consulted an alleged ear specialist, who continued to treat him until four weeks ago, when he made some application to his ears that caused him such pain that in walking to the doctor's office he attracted attention on the street, as he felt and acted as if almost crazy. This was followed by severe headaches, especially occipital. On November 5, 1890, he had a severe chill, followed by fever, and other chills at irregular intervals. Two of them occurred yesterday (November 15) and one this morning, followed by drenching sweats. Two days ago he became slightly jaundiced. Yesterday he had a slight hæmoptysis. Has also great pain in right chest.

Dr. Berlet was called to see him yesterday, and immediately called me in consultation, after making a diagnosis of pyæmia following otitis media. His temperature, taken by Dr. Berlet yesterday morning, was 105.5°, and in the evening, 103°; this morning, 102°, with his pulse pretty steadily at 125. There had also developed a great deal of pain in the right side, from pleurisy, with effusion.

Present Condition: November 16, 1890.—The patient has a very fetid discharge from the right ear, which shows a perforation of the membrane. The mastoid is but slightly swollen or cedematous; is moderately painful upon pressure, with a little pain just above and behind it, but no pain over the course of the lateral sinus between this point and the inion. Over the mastoid process the neck was extremely tender, though but little swollen. The jugular vein could not be felt. He has difficulty in swallowing, and is somewhat hoarse. He is a little jaundiced, and liver rather tender. There is some dullness on the whole of the right side, from slight pleuritic effusion. No headache at present. Beginning choked discs.

Concurring in Dr. Berlet's diagnosis and desperate prognosis, I decided to operate immediately, as it gave him his only, though a very remote, chance for life.

First I trephined the mastoid and evacuated a considerable amount of cheesy pus, which was very fetid. I then chiseled away the bone backward and upward, so as to expose the lateral sinus. Almost immediately on beginning the chiseling I cut the mastoid vein, which bled very freely, but was readily controlled by plugging with iodoform gauze. I exposed, in this way, easily three-fourths of an inch of

the sinus, which looked dirty yellow, with a slight tinge of green and brown at different points. It felt soft to the probe, but was detached from the bone to such an extent that the probe could be passed easily down and forward for over an inch, and evacuated a little offensive pus. I then exposed the jugular vein in the neck. In doing so I found the tissues quite firmly united to each other by inflammatory adhesions, but after some little difficulty exposed the vein, which was thickened, and almost entirely collapsed. A ligature was then thrown around it, an inch and a half above the clavicle—as low as I dared to go. On cutting the vein above the ligature, very little blood oozed out, but fragments of an excessively fetid clot were evacuated from its interior. The odor was so offensive that it was noticed eight or ten feet away. The facial vein, where it entered the jugular, was also thrombosed. The part of the vein from the ligature up the facial was then removed, and the gaping mouth of the vein above sewed to the skin by two stitches.

Next I opened the lateral sinus. The free flow of blood from the mastoid vein had prepared me for abundant hemorrhage, though the discoloration of the wall of the sinus had led me to think that the softened condition might be due to a softened clot. The moment the incision was made, a violent gush of blood showed that there was no thrombus. In an instant I plugged it firmly with iodoform gauze, so that the amount of blood lost was probably not over an ounce and a half.

The wound in the neck was now closed in the ordinary manner, with drainage by horse-hair. The patient was put to bed in a fair condition after so grave a series of operations. His wife had been told, when I saw him, that his chances for life were almost *nil*, and that the only chance lay in operation; and that I was willing to undertake it if she desired it. During the operation his pulse became thready, and $\frac{1}{2}$ of a grain of strychnine was given him hypodermically. This stimulated him, and his pulse, after the operation, was 140, though rather feeble. His color was very good.

He was directed to have two ounces of milk, and one ounce of brandy, every two hours, and as much champagne as he could take.

November 17, 1890. For the first twenty-four hours he did very well. His temperature did not rise above 102° , and his general condition was good. He had, however, a second attack of hemoptysis this morning, when he expectorated about an ounce of blood. At 3 P.M., he was suddenly seized with dyspnoea, evidently due to extension of the clot in the jugular into the lungs, or else to the embolus which was detached and passed into the pulmonary vessels. In spite of the most vigorous efforts of the Resident, he died in an hour. No post-mortem could be obtained.

Dr. Barr kindly made a microscopic examination of the vein and clot, and reports as follows:

Jugular vein:—Septic inflammation, infiltration around the cells, much necrotic tissue, micrococci and bacilli present.

Thrombus:—Many pus cells, some red blood cells, many micrococci.

Remarks.—The diagnosis in this case by the doctor who first saw him was: First, chills and fever; and later, when the jaundice set in, disease at the liver.

As soon as Dr. Berlet saw him, it was clear to him, as it ought to have been to any one else, that the case was one of pyæmia. The prior diagnoses are admirable illustrations of the symptoms masking the diagnosis, or, to use a French proverb, the doctor

"could not see the forest for the trees." Our prognosis in the case was that of certain death if no operation were performed; and almost certain death even if one were performed. But remembering the cases to be alluded to in a moment, it seemed to us worth while to take the desperate chance.

As to treatment, such cases have, until very recently, gone without any treatment, except the expectant one, which led always to death. Their treatment is of great importance, especially as such cases are not of very infrequent occurrence, as is evident from the fact that Mr. Ballance estimates that, independent of other ear diseases, such pyæmia causes nearly one death a week in London alone.

In 1886, Mr. Horsley (Trans. Clin. Soc. of London, Vol. XIX), I believe, first suggested ligation of the internal jugular in cases of pyæmic thrombosis of the lateral sinus.

In 1889, Mr. Lane (Trans. Clin. Soc. of London, Vol. XXII) reported the first case of purulent thrombosis of the sinus, so operated upon. The patient was a boy of ten years of age, and made a rapid recovery after the ligation of the internal jugular vein.

In the *Lancet* for May 17 and 24, 1890, Mr. Chas. A. Ballance reports four cases, in which operation was followed in two cases by recovery, making three cases of recovery out of five.

The object of the operation is, of course, by ligation of the vein to prevent the extension of the septic clot further toward the heart, or if the clot itself does not extend, to prevent an embolus from it which will do equal damage in the lungs, and, at all events, to prevent further entrance into the circulation of the products of the infective clot. Even in pyæmia without thrombosis of the sinus, if the source of the pyæmic infection is the temporal bone, Mr. Ballance wisely advises ligation of the jugular, and packing of the lateral sinus, for the same reason, namely, to prevent further absorption of the poison.

In the present case the sinus was not thrombosed, though to the eye its color indicated such changes as led me to think that it was the seat of septic processes. The treatment, however, was clearly indicated—to prevent the pouring into the circulation of the further septic products of the clot in the jugular vein. Unfortunately, before we had the opportunity to operate, the clot had already extended doubtless to the innominate vein, for I applied the ligature only an inch and a half above the clavicle, and the clot even at that point was so foul that the odor was perceptible eight or ten feet away as soon as the vein was opened. Not being able, therefore, to get between the clot and the heart, the case was regarded by us as hopeless the moment we found such extensive thrombosis. The tissues of the neck were all solidified by the septic inflammation around the vein, so that they had to be dissected apart in searching for the vein, instead of simply loosening them from each other as would be the case in an ordinary neck. This condensation, as well as the partial collapse of the vein, made it impossible to detect the vein itself as a thrombotic cord.

I prefer the method I adopted of first opening the mastoid antrum, and then by gouge and chisel opening the canal for the lateral sinus, rather than trephining.

I think the danger of wounding the sinus is lessened, as the bone is of very unequal thickness at the groove for the sinus, and, besides, it is usually more or less loosened from the bone, as in this case, by a layer of foul pus.

The most important point of all, however, is that

physicians who see such cases early in their history should be impressed with the fact that if a chronic otorrhœa is followed by headache, pain, chills, oscillations of temperature to the extremes, with repeated chills and local œdema, tenderness over the mastoid, over the internal jugular, and over the course of the lateral sinus, and possibly, as in this case, the beginning of optic neuritis, a surgeon should be called as quickly as possible, the mastoid opened, the vein ligated, and the sinus plugged.

As to operative procedure, the plugging of the sinus does not involve any great loss of blood, even if there be no clot. Obstruction of the entire sinus on one side does not involve, it should be remembered, the obstruction of both lateral sinuses, the right being usually continuous with the superior longitudinal sinus, and the left with the sinus rectus (Gray), and with slight communication between them, and sometimes none.

All the papers alluded to are well worth reading by any one who desires to make himself familiar either with the clinical study or the operative procedure.

DOUBLE HARE LIP AND CLEFT PALATE. —PLASTIC OF ALVEOLUS.

By DE FORREST WILLARD, M.D.,

Surgeon Presbyterian Hospital; Clinical Professor Orthopædics, University of Pennsylvania, etc.

C. W., aged ten months. Cleft on the right side entirely through the lip, alveolus, hard and soft palate, extending into and opening the nasal cavity into the mouth. The cleft of the soft palate is half an inch in width. The turbinated bones of the nasal fossa are exposed. The inter-maxillary bones are pushed forward and tilted, so that the extremity of the left alveolar section projects in front of, and overlaps the shorter right alveolus, so that when the jaws are closed the lower maxilla falls fully half an inch behind the upper one, thus preventing any possibility of future mastication. The upper jaw also projects markedly in front of the lower alveolar curve. The skin and soft tissues covering the front of this central inter-maxillary region, are pushed forward, so that they are nearly in a line with the tip of the nose, and there is no nasal projection at that point. The right ala is flat, from its want of bony support. Although the cleft of the lip is double, the alveolus on the left side is not divided. The width of the separation of the alveolar portions on the right side is one-eighth of an inch, and the entire projection, anteriorly, is one-half of an inch.

Operation—As mastication would be impossible in the present condition, the super-maxillary was cut through its alveolar portion by a chisel, opposite and above the first molar teeth on the right side, care being taken to injure the teeth germs as little as possible. The bone was then fractured and pushed back by strong force, applied by the cushion of the hand, until it was brought into line of the other alveolus. As a tendency, however, to return to its former position was still apparent, the fragments were drilled, and wire sutures were carried through each section, and the wires were then shot, the edges of the alveolus having been freshly pared and freshened before approximation. After the replacement of the soft parts, a long and strong pin was thrust through the lip and through the two fragments, uniting all and holding the jaws firmly in place, while it also acted as a splint for the soft parts. Both the clefts in the lip were then thoroughly pared, commencing at

the apex of the triangular spaces, and cutting downward until the red border of the lip was reached, when the partially-severed flesh was permitted to hang with its base still attached to the lip, so as to avoid the loss of any tissue whatever. These four flaps were everted and held out of the clefts, while pins were inserted, so that these projecting flaps might assist in retaining the fullness of the lip, and preventing the deep fissure which so frequently mars the appearance of the border in any operation in which simple paring has been done, and the pared tissue is sacrificed. There will be at first, as is always the case, a redundancy of material; but as cicatrization and contraction occur, shrinkage takes place, and in the course of a year it is not probable that any redundancy will exist. Even should there be any excess, simple snipping with the scissors will suffice to remove it.

The two clefts were united separately with black silk sutures, without the use of small pins. The only pin used was the long one above mentioned. Long strips of adhesive plaster, extending from the neck upon either side diagonally across the lip to the front of the ear on the opposite side, were then applied. The special advantage of these strips being to control muscular action and to keep the parts at rest. When properly applied, these strips are an important part of the dressing, as they splint the whole lower part of the face, and prevent traction by the muscles upon the fresh edges. The long pin, as it had no suture thrown about it, exerted no compression upon the tissue, and it was allowed to remain for five days, to assist in the fixation of the bone fragments. Union of the soft parts was then perfect, and all the stitches were removed, reliance being placed upon the adhesive plaster.

During re-dressing, an assistant's hands should always maintain accurately the position of the flaps, prevent muscular action from the crying of the child, and thus separating the freshly-united tissue.

On the tenth day the small redundant flaps, which had been saved, and which had been stitched with silk, were re-pared at the points where they had failed to unite, after which firm union took place and a small projection marked the line of the cleft instead of a depression, which is usually the case.

The wires were removed on the fourteenth day, and perfect union was found to have been secured between the two portions of the alveolus.

The cleft in the palate, of course, still remains, and will require a subsequent operation, on account of the great width of the opening; or, an obturator may be used.

SOME OBSTETRICAL DON'TS.

By T. RIDGWAY BARKER, M.D.,

Demonstrator of Obstetrics and Chief of the Obstetrical Department in the Medico-Chirurgical College of Philadelphia.

DON'T declare a woman pregnant until you hear the foetal heart-sounds.

Don't fail to distinguish maternal from foetal heart-sounds.

Don't forget important additional signs—ballotement, progressive enlargement of uterus and abdomen, etc.

Don't consider a woman necessarily pregnant because there has been cessation of menstruation for several months.

Don't certify that she is not pregnant because she is not married and denies sexual intercourse.

Don't diagnosticate a woman pregnant because enlargement of the mammae occurs during the first few months following marriage.

Don't accept cessation of menstruation and abdominal enlargement as conclusive signs of conception.

Don't think "morning sickness" and cervical softening pathognomic of pregnancy.

Don't assert that a female is not pregnant because she has a flow of blood from the uterine cavity at her usual menstrual period: decidua vera and reflexa are not in apposition before the third month.

Don't fail to employ the pelvimeter in cases of pregnancy where there are reasons for supposing that there exists an abnormal narrowness of the external pelvic diameters.

Don't consider "morning sickness" uncontrollable and irremediable; look to the diet and forbid all those articles save agents promoting digestion and assimilation.

Don't overlook abdominal distention and increased weight as a possible cause of irritable heart and labored breathing.

Don't allow vesicle irritability and tenesmus to keep your patient awake at night, nor to occasion inflammation and excoriation of the external genitalia.

Don't take for granted that her bowels are regular, but see that your orders in this respect are carried out.

Don't restrict the diet during gestation, it should be of a wholesome and nutritious character—allowances must be made for "cravings."

Don't confine the patient to the house, but encourage the taking of exercise and fresh air.

Don't disregard the state of the nervous system; recollect that it is exalted.

Don't ever consider a case of labor too trivial to require any care and attention.

Don't omit an examination of the mammae and nipples.

Don't fail to diagnosticate between elevations of the skin about the nipples due to sudden chilling of the areolæ and true tubercles of Montgomery, which are uninfluenced by change of temperature.

Don't delay the employment of remedial agents for the relief of pruritus vulvæ, as it is very distressing.

Don't allow the pregnant female, after the third month, to take any violent exercise, nor to go up and down long flights of stairs.

Don't fail to interdict washing done in cold water, as it is liable to lead to congestion of internal organs of a serious character.

Don't permit her to lift heavy bodies, as such strains endanger the integrity of the membranes and placenta, thus jeopardizing the life of the foetus.

Don't consent to her taking drives over rough roads, nor in cable cars.

Don't overlook the dangers incident to long railway journeys during the latter months—especially if the railroad has a number of steep grades and sharp curves.

Don't underestimate the importance of ascertaining the source of hemorrhage during gestation; be on the alert for the occurrence of placenta previa.

Don't fail to insist upon rest in the recumbent position for multipara who have previously miscarried during the latter months of gestation.

Don't hesitate to give sedatives freely in cases of threatened abortion or miscarriage to control nervous excitement and allay muscular contraction.

Don't advise her to indulge in social pleasures of an exhaustive nature, nor let her be persecuted by unwelcome visitors.

Don't allow her to be subjected to shocks of electricity, nor loud noises of a terrifying character.

Don't let her witness scenes of an exciting nature, be they extremely tragic or melo-dramatic.

Don't neglect pointing out to her the advantages to be gained by discarding her corsets and other articles of clothing which constrict the movements of the chest and abdomen.

Don't fail to supply the osseous system with abundant material for its nutrition and growth.

Don't forget that the blood during the period of gestation is altered in character, containing a larger amount of water and fibrin, less albumen and red blood globules.

Don't forget mentioning to the primipara that she will most likely "feel life" in the fourth month, and prepare her mind for such an occurrence.

Don't neglect to explain the cause of the purple lines on her abdomen.

Don't omit warning her against wearing tight and insufficient clothing; corsets must be discarded.

Don't recommend very cold nor very hot baths.

Don't sanction the administration of anæsthetics, unless imperatively demanded, lest abortion follow from the violent muscular contractions induced during the stage of excitation.

Don't consent to any operation upon the uterus, vagina, rectum, or bladder which can be postponed until the termination of pregnancy without increasing the risk to the mother.

Don't administer drastic cathartics nor agents likely to unduly excite the muscular walls of the intestinal canal, lest abortion be induced.

Don't insist upon frequent digital vaginal examinations.

Don't disturb mucus in cervical canal.

Don't pass anything, under any pretext, into the cervical canal, in even suspicious cases.

Don't introduce a speculum or tampon unless circumstances demand.

Don't allow sexual intercourse after the third month.

Don't fail to examine urine frequently for albumen and sugar.

Don't think that every woman who is pregnant, and has albuminous urine, must therefore have puerperal eclampsia.

Don't mistake abdominal and uterine intermittent contractions for foetal movements.

Don't fail to appreciate the significance of "lightening" as indicative of the approach of labor.

Don't mistake the lochia for leucorrhœal discharge.

Don't fail to remove all fecal accumulations from the rectum before the onset of labor.

Don't disregard the state of the bladder—see that its contents are evacuated.

Don't endeavor, by friction or other means, to hasten delivery in cases pursuing a natural course.

Don't attempt dilatation of the os by mechanical means, unless nature fails or demands assistance.

Don't press upon fundus of uterus during the intervals between pains.

Don't be too anxious to bring about rupture of the membranes.

Don't forget that the worst kind of midwifery is meddling midwifery.

Don't fail to follow the uterus as it contracts during the second and third stages, with the hand on the abdomen.

Don't deliver the head too abruptly from under the pubic arch; let the face sweep over the distended perineum.

Don't make traction on the neck, but wait for a pain.

Don't forget the head has to undergo external rotation in order that the shoulders may occupy the antero-posterior diameter of the outlet.

Don't fail to stimulate infantile respiration by friction and change of position.

Don't sever the cord until pulsations cease, except in cases associated with severe hemorrhage.

Don't fail to tie foetal end before severing.

Don't disturb the placenta for twenty minutes.

Don't allow the uterus to become relaxed.

Don't fail to note the amount of blood lost, and its effect upon the parturient.

Don't omit examining after-birth, to see that every portion of it has been expelled.

Don't introduce the hand or fingers into the uterus unless occasion calls for it.

Don't allow the nurse to touch the person of the patient unless her hands have been rendered as aseptic as your own—a fact of which you are assured.

Don't think that because you order a thing done that therefore it is done, or will be done.

Don't fail to examine, after the third stage of labor, the vagina and perineum for possible lacerations.

Don't put off repairing either, but introduce stitches immediately.

Don't omit warning the nurse about getting soap in the infant's eyes.

Don't permit it to be scrubbed as if it were a kitchen table.

Don't depart without examining the outlets of the infant's excretory apparatus, to see that they are pervious.

Don't have the child removed from the mother's room—change of temperature is likely to occasion pulmonary trouble.

Don't forget the mother while looking after the child.

Don't put the child to the breast for several hours after delivery, that the mother may have some rest.

Don't allow visits from friends for twenty-four hours, or longer, if possible.

Don't take for granted, but see that the nurse does not allow a single soiled or damp article of apparel about the patient.

Don't imagine the risk of a change of clothing is as great as the risk of subsequent infection.

Don't employ ergot in every case after the third stage—wait indications.

Don't fail to order the patient a glass of milk, or other easily-digested fluid, within two hours after her confinement.

Don't permit her to have a drop of alcoholic spirits, unless it is to overcome dangerous symptoms of collapse.

Don't be alarmed by a chill during, or at the close of labor—simply a nervous disturbance.

Don't visit the patient without seeing that the lochia is natural and normal in appearance and amount, and possesses simply its characteristic odor.

Don't allow discharges to accumulate about the external genitalia nor within the vagina, lest they become a source of infection.

Don't postpone the use of intra-vaginal antiseptic injections an hour after the discharge gives forth a fetid odor.

Don't omit taking pulse and temperature; if both do not fall after several hours, explore parturient canal.

Don't overlook condition of bowels and bladder after delivery.

Don't fail to visit patient in from six to eight hours after her confinement.

Don't postpone an examination of the external genitalia of the infant—see that they are properly cleansed daily.

Don't have the child confined in a room flooded with sunlight.

Don't permit the child to be given anything but breast milk and an occasional drink of water.

Don't allow the child to go more than two hours in the daytime without being fed, and three to four hours at night, during the first six months.

Don't let the child fall asleep at the breast with the nipple in its mouth; nor must the breast be given it every time it cries.

Don't neglect to inform the mother that the breast must be bathed with some weak alkaline solution each time after nursing, and then anointed with some simple unguent.

Don't fail to have the meconium expelled at an early date.

Don't take it for granted the child's eyes are all right because you are not informed to the contrary.

Don't declare the mother, after nine days in bed, beyond the dangers of puerperal complications. Involution is a matter of weeks, not days.

Don't administer salines during lactation, unless you desire to diminish the secretion of milk.

Don't allow the breasts to become engorged with milk, lest inflammation and abscess result.

Don't be surprised if breast-pumps fail to relieve a hard and tender mammæ; they cannot open up choaked gallactopherous ducts; such a condition requires persistent friction, massage, and hot applications.

Don't presume the infant's tongue is of necessity tied because it cries when it takes hold of the nipple; its gums may be sore, or the milk may be overheated and indigestible.

Don't fail to call attention to the risk the mother incurs in carrying her infant as soon as she is permitted to leave her bed.

Don't keep the child in a "sweat-box," as it were, by bundling it up in blankets.

Don't allow the infant to be tossed about as if it were a foot ball.

Don't grant any one permission to smoke tobacco in the same room with the child, as the fumes are highly irritating to the eyes and respiratory apparatus of the infant.

Don't have the child wrapped up in articles of clothing that have been dyed, lest the poisonous coloring matter comes in contact with the child's person and a high degree of cutaneous inflammation be excited.

Don't expect to succeed in the practice of obstetrics unless you are faithful, attentive, and ever solicitous about the welfare of your patients.

1703 SPRUCE STREET.

THE TREATMENT OF PUERPERAL MASTITIS.

BY CHARLES MEIGS WILSON, M.D.,

Physician in Charge of the Philadelphia Lying-in Charity.

INFLAMMATION of the mammary gland as the result of traumatism is so rarely met with that in this short paper it is unnecessary to consider it. Puerperal mastitis, on the other hand, is a sufficiently common accident; and the consideration of its prophylaxis and management is of very great interest to all engaged in active obstetric practice. The methods

advocated in this short paper are not original, and are not new. Yet they have not been generally accepted; and the mass of the profession still hold to the older and less effectual methods of treating this affection—alike so painful to the patient and so annoying to the practitioner.

The former method of *dry diet*, which lessened the volume of blood and reduced the source of supply from which the mammary secretion was drawn, and the administration of saline laxatives to promote derivative action from the bowels, were excellent in their way. But the old-fashioned topical applications of solutions of camphor, belladonna ointment or plaster, or solutions of atropia, or other agents of a like nature, in the earlier stages of mammary inflammation, as an abortive method of treating mastitis, and the later applications of poultices to hasten suppuration, and parsimonious incisions to let out the inflammatory products, have always yielded discouraging results in the experience of the author. On the other hand, the plan of treatment herein advocated has always given happy results.

First, then, let us consider the prophylactic treatment of puerperal mastitis.

In hospital and private practice, the author has latterly adopted the plan detailed below, namely, the patient and nurse are warned against allowing the bowels to become constipated, and, instead of waiting for the customary injection, or dose of oil, on the third or fourth day, gentle action of the bowels is secured upon the second day by the administration of small doses of compound liquorice powder, given in the form of compressed pills—the pleasantest way to administer it—or of the pil. rhei comp., or some gentle laxative of like nature, in small doses, repeated until the desired effect is obtained.

Secondly, the nurse is instructed to wash the nipples with warm water before and after each time that the child takes the breast. After the child is through nursing, and the nipples have been carefully washed and dried, they are smeared with castor oil. This agent was selected because it has what the painters call sticking properties, and because the heat of the patient's body does not cause it to melt and soil the patient's clothing by running over it. For the reasons mentioned it is better than coca butter, or any of the petroleum jellies, for the purpose of anointing the nipples. If the nipple is at all retracted, a Needham nipple-shield is used (with a black-rubber teat substituted for the ordinary white teat furnished with the shield, in order that the child's mouth may not become sore from the lead used in bleaching the rubber). If the nipple becomes chapped or excoriated, the cracks are touched once a day with a 10 per cent. solution of nitrate of silver, applied with a small, camel's-hair pencil. When any overfilling of the mammary is noticed, as evidenced by turgescence of the subcutaneous veins and the milk ducts, whether the condition of gallactorrhœa be present or not, the patient's consumption of liquid diet is immediately curtailed; gentle saline laxatives, such as drachm doses of the sulphate of magnesia, are given every few hours, until the bowels are freely open. A few circular turns of a four-inch shrunken muslin bandage applied around the patient's chest in such a manner as to make firm compression over the upper and lower third of each breast; and yet in such a manner as not to interfere with the child's ready access to the breast. Or, in place of the circular bandage, the ordinary Richardson bandage may be used.

The simple treatment as outlined above is prophylactic in character, and will generally suffice, unless

the inflammation has reached an advanced stage. In those cases where this latter condition has been reached, or where, from the death of the child, it is necessary to suspend lactation entirely, it is the author's practice to cover the breasts with a thick layer of carded wool in order to equalize the pressure and to confine them as closely to the thoracic wall as possible, with double figure of eight thoracic bandage, using always a broad bandage. In doing this, however, care must be taken not to subject the patient to too severe physical pain, or embarrass the respiration by applying the bandage too tightly. No matter how tightly the bandage may be applied, there is no danger of injuring the mammary if a thick layer of wool be placed over each breast before the application of the bandage. In those cases of more advanced inflammatory action where suppuration is inevitable, early incision of the inflamed area, with efficient drainage under antiseptic precautions, is the best possible means of relief. Dry diet, with frequent evacuation of the bowels, obtained by the administration of saline laxatives, to promote derivative action of the intestinal glands, and pressure applied to the mammary over antiseptic pads, will generally bring about a speedy amelioration of the distressing symptoms that most always attend mastitis.

These hints of treatment for one of the troublesome accidents of the puerperium are offered by the author after a large experience, in which, when they have been adopted, happy results have always attended their use.

DOUBLE PNEUMONIA COMPLICATED WITH ABORTION.

BY WILLIAM F. WAUGH, M.D.

DURING the prevalence of influenza last winter, all my cases of pneumonia were treated by the use of hot poultices and the administration of the Febricide pills. These pills contain two grains each of quinine and acetanilide, and $\frac{1}{8}$ grain of cocaine. There is nothing secret about them, and the object of this note is not to claim superiority for any special maker of pills, but simply to advert to the merits of the formula. While the pills made by the Health Restorative Company were employed for convenience, and proved entirely satisfactory, any reliable retail druggist could prepare them quite as well, except for the coating. But the combination is one of very great value; combining, as it does, an efficient antithermic with a cardiac tonic; and a third drug—quinine—which shares in the action of both the others and has a special effect in combating the tendency to suppuration. Perhaps in no disease do we meet with the indications for this combination so perfectly as in pneumonia. And in the pneumonia prevalent last winter we had an opportunity of putting our methods of treatment to the most severe test offered during the present generation.

My records show that during the grippe period, I attended twenty-three cases of lobar pneumonia; all of which recovered. Ten of these were hospital cases; the remainder occurred in my private practice.

Out of this group I have selected the worst case, as the one which was in the greatest danger of death. She was a stout German woman, illiterate, living in unsanitary quarters, with an inefficient nurse. Everything was against her; yet she recovered. She was about twenty-four years of age, of good constitution and habits, except that she used beer moderately but regularly. I have learned to look upon this as of bad omen in pneumonia. She had been much disturbed

by her baby, about a year old, who had been sick for some time with the influenza. March 1 she was seized with a chill, and presented the characteristic symptoms of pneumonia. The disease rapidly extended to both lungs, until the dyspnoea was extreme. During the first three days my orders were not carried out by the drunken nurse, who was dismissed on March 3. By this time the patient was in a pretty bad state; the respiration being carried on by the upper lobes alone; the lips blue; breathing very rapid; temperature running up to 104.5° and pulse to 136. Vomiting had been troublesome before her illness, as she was about five months pregnant. It was with difficulty we could get any food to remain in her stomach for a few minutes at a time. During the night of March 5 she aborted; losing but little blood, the foetus coming away easily. By this time the nursing department had been reconstructed, and food, medicine and poultices were attended to very nicely. Crisis occurred March 7, and the case went on to recovery without any untoward incident. The patient was discharged from treatment on March 22; convalescence being somewhat prolonged by the effects of the abortion, and by the bad hygienic surroundings. Alcoholic stimulants were used throughout in the same quantities the patient had been accustomed to before her illness. The above-mentioned pills were the only drugs given, except a few doses of wine of ergot, a teaspoonful each, just after the abortion. The case was watched throughout with the utmost solicitude; and the unexpected recovery was looked upon by all who saw it as a notable instance of the value of the combination employed.

Nor is the treatment of twenty-three cases without a death, during the prevalence of influenza, a record so common as to be undeserving of notice. The great work of Juergensen, in directing attention to the heart as almost the sole source of danger in pneumonia, has never received the general attention it deserves. People recover from pneumonia, in spite of their treatment with antimony, veratrum, aconite, or the depressant antipyretics given alone; and that in sufficient numbers to confirm their medical attendants in the use of these drugs. But the magnificent results of Juergensen, with hundreds of cases, and no deaths except in the aged, have never been paralleled. His methods of cold baths, quinine, red wine and raw beef, seems too peculiar to find general acceptance in this country, where the cold bath has never really extended beyond hospital practice. The object, however, sought in my own method of treatment, is precisely the same as that of Juergensen—to sustain the heart, directly, and by combating the fever that saps the strength of the heart and increases its labor. With him I say: It is the heart, always the heart. Here lies the danger; here must be the remedy. Every means we employ for treatment acts for good only as it strengthens this organ or relieves it of its burdens. Antipyretics accomplish the latter object; it is necessary to see that they do not hurt the patient more by lowering his cardiac power than they do good by lessening the fever.

AN Indian story, published last Wednesday in the *Star*, revives the fallacy as to the danger of bringing a frozen person into a warm room. The story tells of an Indian woman who laid out her frozen lord on the ice and thawed him out by dashing buckets of ice-water over him. It has long since been proved that hot applications are most likely to succeed in restoring persons who are frozen.

THE RESORPTION OF IMMATURE CATARACT BY MANIPULATION CONJOINED WITH INSTILLATION.

By L. WEBSTER FOX, M.D.

SOME months ago the ophthalmic world was notified by Dr. Kalish, who read a paper before the New York Medical Society, that he had had success in dissipating immature cataracts by massage, boric acid, and glycerine. This new treatment, which promised much, was received by the profession with grave doubts, but by the laity with much hope; especially those who were suffering with immature and mature cataracts. The dread of an operation makes the majority of those afflicted postpone an operation as long as possible. It is only their extreme helplessness which makes them consent at all. A second operation upon a person who has gone through successfully with one eye is never dreaded. Cocaine, aseptic care, a good knife, and a steady hand, usually bring good results. Knowing this, a patient's consent is obtained without much difficulty.

At the last meeting of the same society (November 24, 1890), Dr. Kalish read a second paper, wherein he repeated his assertions and reported continued progress.

Dr. Noyes, in the discussion which followed this paper, regretted that Dr. Kalish had not stated the kind of cataract which he considered suitable, and the kind which were unsuitable for this treatment. As a probable cause for the improvement of vision in certain cases, Dr. Noyes explained as follows: "It meant that the serous fluid which had become effused into the substance of the lens, between the fibres, gradually became spontaneously absorbed, the lens adjusting itself to the new condition, became more homogenous, somewhat more dense, and thereby vision was made better."

There is no doubt that in the earlier stages of cataract, we find an occasional interruption of vision; for some weeks a patient will complain of dimness of his sight, then a clearing up will manifest itself, and so these intermittent stages continue for months. If such a patient were to apply any collyrium at such a period, he would think that he had found a panacea for his cataracts.

Among country people (I speak of the Pennsylvania Germans) there is a popular idea that molasses dropped into the eye afflicted with ulcers of the cornea and cataracts, will cure these diseases. I have just removed a cataract from such a patient; he declared positively that the molasses did clear up his vision when he first applied it, but soon lost its magic power.

A patient has recently been under Dr. Kalish's treatment for two months. The treatment did not benefit this woman at all; although the patient thought that during the first two weeks there was a change for the better, the husband who was in daily attendance upon his wife, could see no improvement. The patient was first examined by myself October 29, 1887. The record at that date shows mature cataract in the right eye; vision of the left $\frac{7}{8}$ sph. + 125 improved to $\frac{7}{8}$, with beginning cataract in this eye. The patient is blind in the left eye to-day. This patient gave the new method a thorough trial, but was not benefited.

If massage will prevent the development of insipient cataract, it is a simple remedy, but we must still have further proof that it will, before it can be put forth as a positive cure.

A CASE OF CHOREA DUE TO THE PRESENCE OF ASCARIS LUMBRICOIDES.

By A. E. ROUSSEL, M.D.,

Demonstrator of Physical Diagnosis Medico-Chirurgical College; Physician to the Southwestern Dispensary, etc.

MAGGIE A., white, aged six years, applied for treatment at the Southwestern Dispensary, November 17, 1890.

The mother states that the child has previously enjoyed good health, as, with the exception of a slight attack of measles when four years of age, she has had none of the other diseases of childhood.

No neurotic family history can be obtained.

About October 1 it is noticed that the child's appetite has become capricious, and that she is now fretful and apt to awaken several times in the course of the night, as if suffering from pain. This continues for a week, when it is remarked that she becomes feverish at night, and a few days later the same symptoms occur irregularly during the day. On the 18th of October, after a more than usually restless night, the mother notices that the muscles of the face have become subject to repeated contractions, and slight irregular movements are also noticed to involve the shoulders, as well as the extremities of the body. These muscular contractions, uniformly distributed on both sides of the body, rapidly increase in intensity, and do not entirely cease during sleep.

Present condition.—Fair physical development, but rather pale and anæmic.

The movements are so violent that the child has some difficulty in maintaining an erect position; the shoulders are violently jerked upward and downward, while the muscles of the extremities are in more or less constant motion. The muscles of the face are equally involved, while the movements of the tongue are so severe as to interfere to a certain extent with articulation.

Sensibility normal; no heart murmur. Bowels are apt to be constipated.

For the last four weeks patient has been treated at another hospital, but symptoms, if anything, have rather increased in severity.

The mother at this time having occasion to administer a dose of oil for the existing constipation notices the presence of a small worm in the stool, and becomes firmly convinced that this is the cause of all the trouble.

Following this indication small doses of calomel and satmin are prescribed, to be taken for three consecutive days.

November 21.—Since last visit six small worms have been passed, and the mother thinks child is considerably better, especially as the movements no longer occur during sleep. In fact there is a noticeable diminution of the choreic movements to be observed throughout the body.

The improvement is so marked that the mother's view is now seriously taken into consideration, and it is determined not to administer the routine treatment, but instead the child is simply given one-half teaspoonful of tinct. cinchona comp. t. i. d.

November 24.—Improvement continues; the muscles of the face are now but rarely contracted, while the movements of the body are much less violent. Articulation but little interfered with; sleeps throughout the entire night.

November 27.—Movements have almost entirely ceased, with exception of slight twitching of the hands.

December 1.—Child apparently well.

December 13.—Discharged cured.

OPERATION ON A GROWTH IN DOUGLAS' CUL DE SAC.

By C. C. MOORE, M.D.

MRS. A., aged fifty-four, married, no children, weight 176 pounds, flabby, but otherwise well-preserved, came under Dr. J. P. Strittmatter's care August 18, 1890, with the following history: About six months ago she began to have pain in the lumbo-sacral region, which pain gradually increased from week to week, and extended down the posterior and anterior parts of the thigh; being most severe on the left side. At intervals, the pain would be felt as a sharp shooting pain over the region of the anterior crural nerve, causing some spasmodic contractions of the muscles supplied by this nerve. Her trouble might easily have been mistaken for neuralgia or rheumatism. The peculiar features of the pain being its sudden accession on certain movements of the body, such as stooping or extreme exertion. The observation of this led to an examination of the pelvic organs, which resulted in finding a very hard round mass, about the size of an orange, with a roughened surface, low down in Douglas' cul de sac, freely movable, not very tender to the touch; but the pain down the thigh and back could be increased by upward and backward pressure of the tumors. Some days later, an anæsthetic was used, and the mass could be outlined with greater precision, and it was concluded that an operation would be the only means of permanent relief.

The tumor was removed by abdominal section September 25, and proved to be the left ovary, which had undergone ossification, and was so solid as to require a saw to make a median section. It was attached to the left horn of the uterus by a pedicle about half an inch long. This short pedicle with two inches or more of adipose tissue of the abdominal walls, made the ligation very difficult.

The patient made an uninterrupted recovery, returning from Dr. Strittmatter's house, where the operation was performed, to her home in twenty-one days. Since then, she has had some numbness and stiffness of the back, no pain on lateral or anterior flexion, but intense pain on posterior flexion.

PHILADELPHIA, 2349 E. Cumberland street,
December 16, 1890.

HIGHER PRELIMINARY MEDICAL EDUCATION. THE INFLUENCE OF THE GERMAN UNIVERSITIES UPON OUR PROFESSION.¹

By HENRY E. DWIGHT.

FROM the Minutes of the Council, I extract the following authority for the selection of my subject, and its presentation at this meeting of the Academy, by request of the committee.

"In accordance with the leading objects of our organization, the education of the physician both preliminary and technical; the relations of the profession in this country to that of other countries, and the elevation of the literary, scientific and social standing of the profession, are especially appropriate subjects."

In view of the fact that the constitution was altered at the last annual meeting so as "to admit, in addition to those possessing the degree of A.B. and A.

¹An address delivered before the American Academy of Medicine, December 4, 1890, at the College of Physicians, Philadelphia.

M., those who can present evidences of preparatory liberal education equivalent to the same"—the subject proposed in the following paper is of *vital importance* at this meeting of the Academy.

SUBJECT.

Influence of German Universities upon the Medical Profession.

I. *What is a University?* It is one thing in America, another in England, and something else in Germany. Hence the importance of a clear definition. The University of London has no teachers, no scholars, no buildings, except a room in the Burlington House, no libraries, no laboratories, and yet it has a brilliant staff of professors in the scientific and medical department. It is simply the Napoleonic University of France, without the principle of teaching. Why not, therefore, have a university without teachers, in this age of printing of many books on every subject? Because, the mind, the voice, the eye of the living instructor is as necessary to-day as in the days of the Athenian Agora, or Academia, with Plato, Aristotle, Socrates, and their pupils. In Germany, by these means, Hegel, in philosophy; Dorner, in theology; Hoffman, in chemistry, and Von Virchow in physiology, have been equally successful.

Hence a university is a body of instructors, teaching the highest knowledge, of the most worth to men, dealing with their dearest interests, appealing to their finest powers and noblest feelings.

To aid them in this blessed work let the university prescribe certain courses, and what rewards shall follow a complete and thorough training; and not for these alone, but let them arrange for those who thirst for knowledge, and earnestly desire the best sources, who should be welcomed to lectures suited to their needs, just as hungry souls pass through church doors always open to satisfy their wants.

Therefore, universities must teach, must vivify knowledge, by appeals to the discursive reason and the creative imagination. But they must do more—among the services they render when rightly conducted, is the prosecution of scientific research into facts imperfectly examined. True teachers are always progressive, and not content with imparting the conclusions of others. They are investigators for testing the observations of their predecessors, while reaching their own conclusions. In the natural sciences, they will observe phenomena, collect and classify observations, draw inference and force nature to give up her secrets by experiments. Among the greatest teachers in science a large number have been and are now, discoverers.

In such an institution, famed for its teachers, and its original researches, a young student in medicine escapes exclusiveness, because the methods of one science are corrected by those of another. In such an atmosphere, theologians and mathematicians are not intolerant of the votaries of natural science. The student sees a host of men, eminent in genius and industry, who enlarge his horizon by bearing her torch into abstruse paths of knowledge, to masterpieces of thought and feeling which bear fruit in his own mind through life. Hence the catholicity of his views, the elevation of his feelings and the success of his pursuits.

II. *But What Claims Have the German Universities on our Peculiar Attention To-day?* Montesquieu, in his Spirit of the Laws, declared that the English Constitution is found in the forests of Germany, which is abundantly confirmed by Tacitus, and in

later days, by Palgrave Kemble and Sir Henry Maine. English customs and laws migrated with the Pilgrims to America. The Germanic system of common fields was reviewed as commons, or town lands, in New England. The Saxon Hege, warden of the hedge, was the pound-keeper of the United States. In the Mayflower's cabin was representative government, and in the Pilgrim's soul there was reverence for law, to be maintained in a legalized organized town, with a church for God's worship and a seminary of learning for man's welfare, on which rested the institutions of a new world. Hence, Harvard and Yale are each the legitimate offspring of Teutonic ideas and German ideals—the "Alma Mater" of a numerous family.

German universities are controlled by the idea that *national unity* depends on *national culture*; that the *powers* that be are ordained of God; and that *rulers are to be obeyed* if they consecrate their *power* to the *welfare of the whole people*. The instruction is by means of lectures and the discussions are conducted by the professors. With the highest instruction in theory, are combined laboratories, clinics and the best apparatus for observation and experiment, to secure practical instruction. Diligence and scholarship are rewarded by degrees which the student must have before he can graduate or enter a profession. *Our colleges* are stepping-stones, like their gymnasias, to a university. We have no institution which the Germans will recognize as a university, and they have none which an intelligent American would recognize as a college. *Their high schools*, with a six years' course, furnish a general education, not a liberal one, and are designed to prepare students for business life. The school for liberal education is the *gymnasium*, with a nine years' course, which pupils begin at nine years of age. Linguistic and historical studies are the peculiar principles of the gymnasium, and as the Minister of Education, Von Gosler, officially declared in 1882, "are designed to prepare for independent study at the University."

The Real Schools, the rivals of the gymnasias, have received their inspiration from the people, and were promoted by progress in natural science, industrial pursuits, and in realism, instead of idealism. They emphasized modern languages, history, mathematics and natural science. The *real* was to be secured by the Real Schools. But German scholars are not prepared to sever scholarship from the ancient classics, to take in their place the modern languages, or translations of the ancients; and the German government prefers the gymnasium, for every position in its gift is accessible to its graduates. German physicians are not ready for such a change, for out of one hundred and sixty-three medical societies only three gave their unqualified consent for the admission of students in the Real School to the university medical department. There are serious complaints by the German government, respecting the efficiency of their medical students, and fear lest the change in the standard of admission to the university medical department might lower the standard of scholarship. They favor an increase of the study of medicine from four to five years to secure better preparation for the faculty.

The testimony of that eminent chemist, Professor A. W. Hoffmann, Rector of the University of Berlin, is very important to all liberally educated physicians. He is certainly one of the ablest instructors in that great university, and means what he says, viz. :—

"That all efforts to find a substitute for the study of the Ancient Classics, whether in the modern languages, mathematics, or natural sciences, have thus

far proved a failure. How often have I heard young men prepared in Real Schools deeply regret that they had not enjoyed the training of a gymnasium. The ideality of academical study, the unselfish devotion to science as science, the free exercise of thought, the condition and result of this devotion, recede in proportion as the classic basis, as training for the university is withdrawn. I have had much occasion to speak of this matter with friends devoted to physics and mathematics, and, with scarcely an exception, I found they had the same conviction."

These are strong words and merit careful consideration. Similar testimony, as to the value of a classical education, has been given by Liebig, the father of agricultural chemistry; Wolff, Hemeberg, Knap, Nobbe, Stohmann, Kühn, and others, all of whom are well-known chemists and discoverers in Germany.

III. *Does the History of Medicine Confirm these Claims?* Are we members of a learned profession? Should we rank with lawyers and theologians on University Catalogues? Have we a scientific profession? These are important questions in America as well as in Germany. Let us see.

Homer mentions two physicians, Machaon and Podalims, skilful in staunching wounds and relieving pain. The story of Æsculapius proves that as far back as legendary history, men made disease and the healing art a special study, and lived by the practice of their craft; but their observations and theories were worth little, because their philosophy was so crude. The labors of Hippocrates are constantly marred by his identification of effect with cause, restrictions placed on the dissections and undeveloped collateral science; still, his work is a monument of unwearied industry and wonderful fidelity to nature. The signs of facts, for the facts themselves, or effects taken for causes, ruined every system of nosology from Hippocrates to Cullen.

There was no sound anatomy or physiology to solve the problems of the diseased system, and not until the *analytical method* of the Alexandrine School pointed to dissection and unlocked the human frame, did true light reveal the phenomena of disease. Herophilus, their most celebrated teacher, made six hundred dissections, and acquired such authority that the proverb remains to this day: "To contradict Herophilus is to contradict the Gospel." But the famous fire at Alexandria destroyed his researches with the library, but not the principles which they discovered, for Philinus, his disciple, left the most important system of early medicine. Philinus urged a return to observation and clinical studies, and was surrounded by a host of observers, among whom was the celebrated Heraclidus of Tarentum, who first introduced opium into practice.

So far scientific medicine is confined to a university—Alexandria, with its literary treasures and learned men. Let us pass from the East to the West, from Egypt to Italy. Pliny assures us that the Roman people had been without a physician for six hundred years. In some things the world is not wiser now than at that period. Then people resorted to certain temples, even in the severest epidemics, as now to the shrine of St. Vitus, where the "faith cure" had its most numerous disciples as well as victims. St. Ossifyga cared for the growth of bones at Rome, just as St. Ursula now cares for them when dead in the Church of the Eleven Thousand Virgins at Cologne.

In Rome, and at this epoch, appeared the Elder Pliny, who collected in his *Historia Mundi* all the systems from Hippocrates to his own, and has left in his

history many original views and reflections, as evidence of the profound mind of a great naturalist.

From Pliny to Galen, the inquiries multiplied exceedingly, because Galen revived the principles of the great physician of Coos, and held undisputed sway in medical matters till the sixteenth century. Devoted to anatomy and physiology, especially the former, his authority became as infallible in medicine as that of Aristotle in philosophy. With Galen, early medicine lost its greatness, and with the downfall of the Roman empire it retrograded likewise, but during the history of that empire, so far as progress was made in the principles and practice of our art, it was on a *scientific* basis. Æsculapius was enthroned "at Rome, and not at Canossa."

The age of Dante was the period of the renaissance, when science was divorced from superstition and charlatanism. The first modern dissection of the human subject was made by Mondini di Luzzi, towards the close of the sixteenth century, when the tone of the European mind influenced art as well as medicine. But the public authorities censured Mondini, and dissection ceased. In the seventeenth century, Vesalius resumed them, and laid the foundation of modern anatomy. The purity of his intentions, and his noble views, removed popular prejudice, which enabled Ambrose Paré first to turn to practical use the labors of his predecessors, and, as surgeon to several European sovereigns, by systematizing the researches of his predecessors, lay the foundations for the structure reared by John Hunter, Dupuytren, Abernethy, and Sir Astley Cooper. During the eighteenth and nineteenth centuries, such stars of the first magnitude as Morgani and Scarpa in Italy; Haller, Börhave, Heister, and Sömmerring, in Germany; Dupuytren, and the illustrious Bichat, in France; Cullen, and the Hunters, in England; all eminent physicians and surgeons, continue the work of scientific research in medicine and science, based on facts and not on theoretic principles, in a field of inquiry commensurate with the three physical kingdoms of nature.

Surely, *the Germans have not erred* in their estimate of a classical and scientific training for a physician up to the nineteenth century, if the history of our profession means anything in the development of the race.

What shall I say of *our* century, now drawing to a close? How the labors of our predecessors pale before the wonders of the nineteenth century! Physical examinations, chemical tests, microscopical histology, anæsthetics in surgery, have certainly elevated medicine to a science, and its practitioners to the front rank of her votaries, entitled to the respect and gratitude of all enlightened men. Every tissue of the body is under the microscope, all living organisms are the products of elementary cells, so that every difference of structure implies a difference of function. Thus we mount from the simple cells to the marvelous structure, man, the paragon of animals, the beauty of the world. Under the careful study of the German Kolliker, the liver is revealed as a complex and beautiful structure, symmetrical in design, with an arrangement of lobules, cells, nerves, and blood-vessels, worthy of the warmest admiration, not simply to make bile, but to repair the waste of nerve tissue.

No less, the eye, when under the microscope, bears the happiest results. The discovery of the retinal expansion of the optic nerve, or Jacob's membrane, has wonderfully elucidated the phenomenon of vision. Those nerve fibres are specially fitted to the undulations of light. What a change in our theories of color vision!

Anæsthetics have robbed surgery of all its cruelty and half its danger, extended its sphere of action, increased the proportion of recoveries after severe wounds and mutilation, and insured the safety of obstetrics. Within fifty years the operation of stone will probably become obsolete. Small-pox is no longer a possible danger to life. Typhoid fever is rarely fatal, and typhus is almost unknown, except in the wake of armies or famine. Madness is now a curable disease, and the drugs employed are less loathsome than the disease. Fluid extracts and active principles take the place of nauseating powders and tinctures.

The causes of disease are more thoroughly studied and better understood. From a cold in the head to pulmonary phthisis, from lupus to cancer, bacillus is the password, no matter what may be the "grippe" query. Is the bacillus the cause or a consequence of the disease? Let that star of the first magnitude, now in the zenith of Berlin, so guide our wise men, now about to visit him from the East, that we may all have a quick deliverance from the scourge of mankind!

Mr. President, and Fellows of the Academy! I thank you for your patient attention. May I ask for your careful consideration?

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THE WEST INDIES AS A SANITARIUM.

BY WILLIAM F. HUTCHINSON, M.D.

CHAPTER VII.

PERHAPS the most important of all the West Indian islands as a resort for invalids, is the one we are now about to consider.

All others have some peculiar attractions and characteristic value; this seems to combine most of the former, and to add to the latter some new features that are entirely its own. Situated as it is out of the line of curvature that marks the chains of mountain peaks extending from Northern to Southern Continental America, which we have grown to regard as the only remaining traces of a lost continent, its geological formation differs radically from them all. It is peculiarly and entirely an island that has been built by the unremitting and prolonged labor of coral insects, and as is common with such islands, it possesses a drainage peculiar to them, an almost entire absence of hills and valleys, a slight growth of forest, and a surface almost level and slightly elevated from the sea.

It has, from its discovery, been the only one of the islands that has continuously remained in possession of the mother country.

From its first settlement it has been the home of an educated and civilized body of colonists, who have studied its capability in the light of every modern advantage, and have made it what they claim it is, an epitome of England.

In its teeming population (and there is no spot on earth, not even excepting China, so thickly settled), nothing in the way of schools or means of advance has been forgotten, from its university, which is in close relation with two great English schools, down through its high school and those of lower grade, the utmost possible care has been taken to bring the level of education of its inhabitants to the standard of older lands. People who went there first, carried with them their habits of thrift and comfort, and in the new land where climate was no obstacle to full development, they have succeeded in erecting a class of homes both for themselves and visitors, superior in every way to those of the other islands whose advantages have not been so great.

There is nothing that an Englishman takes greater care of than his personal comfort, and I found in Barbados that this essential item to the traveling invalid had been so thoroughly cared for as to leave little to desire. Even an American hotel is not lacking, kept by an American manager, with meals served upon the American plan; a large, handsome, airy building, capable of accommodating three hundred or more guests, with every comfort that we are accustomed to find in our hotels at home, and not a few of the luxuries. It is true that with the American hotel, American prices have come to the island, and it is

out of the question that one can be housed at the Marine, without paying about as much as he would at a first-class New York or Philadelphia hotel. There are, however, several native institutions of the same kind where the usual island rates prevail, and where one may live as comfortably as possible for the regulation two dollars a day.

Besides the hotels in the city of Bridgetown, there are others on the northern coast; notably the Crane and the one at Bathsheba.

There are no surface streams in Barbados, but beneath, in the white coral that forms the roads and the main part of the island, many feet below the surface, there are rivers that circulate in caves of considerable dimensions, and from one of these pure, fresh water is now supplied in abundance to the city of Bridgetown.

Surface drainage is almost unknown. The porous nature of the land makes any extensive system of sewage quite unnecessary, and in the most crowded sections of the town one may walk about between the thickly built cabins of the blacks, without meeting anything offensive to sight or smell, and this perfection of natural drainage is one of the greatest advantages to invalids that the island possesses. The next is its freedom from mountains and valleys. Unobstructed, the steady trade winds that have come across the sea for thousands of miles sweep from one side of the island to the other, and carry away with them in their kindly arms every atom of miasm and every sign of poisonous vapors. From morning until night, and all the night through, these winds search out through the slightly built and always open houses every corner and cranny, and cleanse it with a besom that knows no stay. The absence of trees to any considerable amount, adds to the general healthfulness of the land by avoiding obstruction to the unremitting play of the beneficent trades.

For this same reason the temperature of Barbados is a particularly steady one. During several weeks of residence upon the island my thermometer marked an average through the day of seventy-eight, with a fall of ten degrees each night. Through the hottest hours, and these were from eleven to four, there would be a rise of ten degrees, and the sun, almost vertical, was reflected back from the white streets and house walls with a force that needed to be protected against; but the winds were so strong, so steady, and carried away from the surface of the body the insensible and sensible perspiration so fast, that the sensation produced was one of comparative mildness, and the danger of sun-stroke to the unaccustomed visitor was greater than it would have been with a higher temperature, without the steady breeze.

One of my party, who was unacquainted with the peculiarity of Barbados in this direction, started for a walk in the middle of one of these bright days, from the Marine hotel to the centre of the town, a distance of about a mile, without the protection of a sun umbrella, which no native would have neglected; he paid for his carelessness by a sharp attack of sun-stroke, and although almost a year has passed, the effects of that blow have not been recovered from. Every one who goes into the street in Barbados at midday, should carry a protection over his head against these powerful, vertical rays. It is better, however, to avoid walking, where cab fare is as cheap as here, and where animals are accustomed to the heat.

The approach to the island is one of extreme beauty. When the traveler has for a week past been studying pictures of scenery of mountain and glen; has been watching in living volcanoes and riven rocks the evidences of terrible forces that have buried a con-

tinental, and has been growing accustomed to types of flowers and animals peculiar to volcanic lands, the change is as great as it is pleasant. To the formation of all other islands of the group, to the especial beauties that one has to climb thousands of feet to find, to the deep forests and hill lakes of Dominica, Saint Lucia and Martinique, Barbados is an exception, dressed in light green and white.

Approaching its soft slopes from the westward, one is strongly reminded of carefully cultivated English hills, an illusion which disappears only when the harbor is entered. But while running down the coast from the North, there are few things to mark the difference—at least from twenty miles away.

No mountain ranges accentuate outlines that grow blue as they recede until lost in the bluer sky; no patches of dark color mark where thick forests lie, and no signal gleam from falling water shows where a white cascade catches sun-rays and sends them back to the watcher to tell where it lies hidden in mountain gorge.

Every acre of land is light-green or snow-white at that distance, with dividing lines of color marking fields; and with a strong glass this is resolved into trim farms, with windmills or tall chimneys for steam boilers to give the needed working power. Drawing closer, the land becomes characteristic, and it is plain that a new formation is before us.

There is nothing ancient in these low hills of coral stone, or shelving shores; nothing that appeals to the geologist or naturalist; only a new world for the student of human nature, who finds in this library—whose volumes are mostly bound in black, many a pleasant problem to be worked out beneath a lovely sky and with genial surroundings.

As we sailed into Carlisle bay, the harbor of the island, early in last February, an air of prosperity and business was seen at once. More than a hundred sail, of many flags, were anchored, among them a noble British squadron of nine men-of-war. Boats were pulling about in every direction, and speedily surrounded us to tout for passengers ashore, as we carefully sidled to our position and let go anchor. They carried any and everything, these boats, invariably demanding double fare at first—the custom hereabouts. But we were used to that, and a shilling apiece was all they got. Before us lay the city of Bridgetown, low in buildings, red as to roofs, spread out three miles in length by two inland, dominated by a cathedral tower, and half hidden in greenery. Rounding the breakwater, called the carenage—for they tip vessels half over, here, to scrape them clean—we ran alongside a stone quay and were ashore, to be surrounded by a crowd of darkies intent upon earning a penny from the new-comers. "Here am I, master!" "Your boy John, master!" "I's Uncle Sam boy William, master!" "Dis de way to de ice-house, master!" *Et usque ad nauseam.*

Most travelers who come here report the negroes insolent, devoid of education, and bristling with petty annoyance. It is odd, perhaps, but I have never seen all this. They are persistent, it is true; but where human life is crowded as here, and pennies are hard to get, why should they not be? During a stay of weeks in Barbados, I have always found the blacks polite and accommodating, even to each other.

No fault can be found with the food supply in quantity or quality. Besides most of those vegetables which we are familiar with at home, there are one or two others that grow only here, of which the natives are very fond. One is the eddo, which resembles closely our home oyster plant.

I think that the density of population is what impresses a stranger most. It is like living aboard a man-of-war, where men are as thick as bees, and space for another one seems difficult to find. There is absolutely no privacy. Out from the town of Bridgetown, as far as you choose to go, the roads are like streets, with little boxes of houses along the wayside, each holding a numerous family, while troops of negroes stroll along the white way. Sit for a moment beneath a *lignum-vitæ* or bread-fruit shade, and negroes spring up from the ground to gaze and wonder who you are. This teeming, concentrated human life is the first novelty that a visitor sees.

In an area of one hundred and sixty-six square miles, one hundred and eighty thousand human beings live—and, apparently, live comfortably well. It is, perhaps, the most densely-peopled territory known, and this state of affairs makes itself evident at once in every part of the island.

Streets are crowded from building to building all day long, as a New York pavement is in the forenoon. The people are almost entirely good-humored blacks, clean, and neatly dressed in white. My driver, William, went through this mass at a steady trot, and they got out of the way easily, without a word of such abuse as is common in northern towns, not often needing his warning, "Look out da! Hi!"

My camera was a continual source of wonderment. They know that "De master takes pictures wid dat masheen," but that is all, and its production in the most secluded spot imaginable would bring together within two minutes an audience large, attentive, admiring, but never annoying.

They live very simply, these children of the sun. For food, fruit, flying fish, and yams are nearly enough; are nutritious, and cost but a trifle—say a penny or two a day. For clothes, plain, white material, which covers them completely, except feet, that are always bare, and an aged straw hat, picked up somewhere, is really more than they need in a climate where clothes are a burden, and Edenian attire something to be longed for. Their attire costs little more than fig-leaves.

One of their little houses, in many instances not more ten feet square, can be rented for about \$2 a month; and water is free. So they get on very comfortably, and, except from habit, do not often beg. That your dog should come up and ask for food does not seem more natural than that these negroes should hold out their hand for a penny; and the brute animal takes a refusal with much poorer grace than the human. A stranger driving past (and every visitor bears his cachet upon his forehead) represents wealth, intelligence, and undisputed superior authority. Why should he not be asked for a penny? Clearly, there is no reason whatever.

Probably the best way of living, for a family that comes to stay several months, is to rent a house at Hastings or Fontabelle, the two chief suburbs of Bridgetown, and have their own home. A comfortable house for four or five persons can be found for \$25 or \$30 a month; and servants, better than ours on the average, can be hired at from \$1 to \$4 a month. There is no difficulty in getting a pleasant place a mile or two from the town, as horse-cars run to all the principal suburbs; and, once at home in the new climate, its highest advantages may be attained.

Artists will find constant amusement and difficult studies in the peculiar color effects that are so hard to catch. Just wherein it lies I cannot tell; but there is something extraordinary in the light of Barbados. My camera, quite trustworthy at home and in the

Western Caribbean, played me strange tricks of over and under exposure upon the same plate. No views out of doors can be made instantaneously, and there is no certainty what the developer will reveal.

And the same disturbing element exists with colors. Black and white quite fail to express tropical effects; and so does the brush—at least, as far as I have seen. One may try as hard as possible to catch the green of yonder bread-fruit tree or mass of changing crotons; but before the sketch is done it is usually destroyed—an utter failure. With longer time some one will learn, doubtless; but no one seems to have done it so far.

Driving is a perennial delight. Roads of rare excellence wind in and out of shady groves in town, and extend over the island in every direction. Horses are fair, and can be hired at reasonable prices; so few people walk. A handsome two-horse landau, carrying five beside the driver, can be secured for \$8 a day for a journey of twenty miles each way, which will carry one pretty well across the island. Cabs are many, and though wretched in appearance, as a rule, get one about cheaply enough. Twelve cents a mile is certainly a moderate price for two occupants, and that is what the charge is.

One can have a delicious sea-bath every day in the year. A reef of coral sand effectually protects swimmers from the immense sharks that infest all these seas, and the water is of a velvety softness that tempts to long indulgence. Daily baths are a necessity where the skin is so active, and a native would sooner neglect his breakfast than his dip.

The leading industry is sugar, and this year's crop is expected to be a phenomenal one, seventy-five thousand tons being the hoped for yield, which, at three or four cents a pound, will amount to a handsome sum. All the fields of brilliant green are cane, shading up from a delicate pea tint with under color of buff, to a dark grass-green, with whose deep shadows the peculiar light of this island plays strange pranks. Sometimes, watching a field, it is almost black, and then, as sunbeams catch it bending over, it will seem red. Through its tall stalks and hanging leaves the ever-present breeze sings of bountiful harvest and far away seed time, and then speeds on its way. In these fields there is no silence. One may almost see and hear the growth, so plain is the creaking and rustling that is going on around, so rapid the increase in size.

I was writing one morning about six o'clock at Fontabelle, and although the sun was not quite up, the pervading light that is never entirely absent from Barbados was reflected back from the sea to my table through bread-fruit and palm trees, as soft as from a sunset cloud. My thermometer marked seventy, and the nocturnal fragrance was not yet all vanished. Perfumes of roses contended with dying odors of the beauty of the night; and day sounds of birds were taking the place of the night-frog, whose musical double note had scarcely ceased to vibrate. Peace and beauty reigned, and as one deep breath after another of this pure, warm air sent blood to finger tips, life, under almost any pressure, seemed well worth living, and lovely earth very hard to part from. The passionate attachment that these simple blacks feel for their native land is easily explained at charming break of day; and a feeling of contentment pervades every nerve of the visitor who has escaped the chilling frosts and deadly winds of northern lands.

Among the best trips, indeed the very best in Barbados, are those by carriage to St. John's Church and Codrington College, and by train to Bathsheba, which

lies among the wildest scenery of this coast, whose grandest views cannot be very imposing since the land does not reach the altitude of a thousand feet at any point.

In company with Mr. Grundy, the courteous manager of the Barbados Railway, I recently made a visit to the North coast under the most favorable auspices. The little railroad is, itself, a curiosity. Only twenty-one miles long, it has twelve stations that rejoice in most ridiculously inappropriate names; and at every one of them the same amount of form and ceremony was gone through as if a train was leaving Liverpool for London. A black grenadier wore a helmet marked "Railway Police," and scared away small loafing darkeys with majestic wave of hand or suggestive touch of rattan. Porters, with their duty printed in big, red letters on cap-ribbons, rushed about among the six passengers that were going with us, as busily as if a thousand trunks were awaiting demolition; and shouted out, "This train leaves for Rouen, Windsor," etc., etc., with as much pomp as if it were actually starting for those very places in Europe. In a third-class carriage in front, a lot of jolly tars from H. M. S. "Pylades" were off for a day in the country where sugar cane grows and rum is plentiful. One of them had a guitar, and we presently heard a song, whose chorus ended with "From Scilly to Ushant is forty-five leagues."

Barbados is everywhere healthful, but when one feels depressed or exhausted with Bridgetown heat, or needs a little rest from hospitable attention, Bathsheba with its cliffs, its delightfully cool nights and excellent hotel, offers a change that few other West Indian places are able to present.

Among the many insects that fly about evening lamps and in pleasant gardens outside, I noticed a painful lack of brilliant colors. No painted moths nor shining fire-flies are to be seen, and the latter are unknown; so that the island offers none of the attractions to an entomologist that are so rich in Venezuela.

Poisonous reptiles are few and scarce; and St. Patrick must have made a flying trip to Barbados, as far as snakes are concerned. I hear of a few centipedes and scorpions, but they are found only in the neighborhood of sugar estates, scarcely ever being seen in town, so that people who fear inter-tropical lands in general as homes for venomous serpents and insects, may put their apprehensions aside if they conclude to go to this island.

One thing we had come to see was what is called the animal flower cave, a collection of actiniae in one of the caverns that dashing water has worn in the rock-face, far below surface level, by years of steady toil.

No place, this, for women, so our ladies returned to the carriage and marooned it awhile, which is Barbadian for recuperation physical, while we climbed down a stony sort of chasm, until before us, a little way across, was the cave opening, and leading to it a narrow path along a ridge, steep, wet, and with most hungry looking waves rusing over it at irregular intervals. The guide watched his chance, darted over with a whoop; and watching ours, we followed. The tail end of a ferocious swell caught one fellow and I thought he was gone, but he escaped with a sound wetting, and we called him clumsy.

Inside, the floor was tolerably dry and quite safe, so after a little more abuse for our friend who had scared us so, we went into an inner chamber, and there in a circular basin with a stone floor, reposed a still pool of liquid glass. Now and then its shining

surface was gently stirred by trickling streams falling into it, but it was almost incredible that water should be so transparent as this. Where there was no motion, nothing whatever parted eye from crevices in that floor, six feet below.

We gathered around, looking quietly at the water, when what had looked like the dead stem of a water-lily near me began to expand. "Look!" I whispered, in fear of spoiling the show; and in twenty seconds that pool seemed a blazing garden of flowers. With a prevailing color of yellow, of the tint of buttermilk, there was enough of red and blue to make purple hues also, which changed as we gazed enchanted, with each slight motion of the plants.

Finally, Jack plunged his hand in after the nearest one, and, presto! the garden was gone, the pool was empty again. Quiet for a moment, and the play began once more, and so we had various acts, all alike. We were in hopes that the colors might change, but they were ever the same.

It is a bad place for rheumatism. Night and day the skin is working to its utmost capacity, and an unnoticed chill stiffens up muscles that refuse with painful persistence to be loosened. Bright's disease and diabetes gain rapidly under the influence of kidney rest, and remain improved, if not transferred too early to northern cold. For those who seek dissipation, who ask "What is there to do down there?" and who demand ceaseless occupation, Barbados is no place.

There is no theatre, no amusement of any kind, and the only departure from such mild fun as driving and sailing furnish, is taken at a social, well-served dinner or a pleasant dance, where each knows all the other guests.

But for quiet, rest and healthfulness, there is but one island of the Atlantic comparable to this, and there Americans find little except climate, and that rated at four dollars a day.

The same suggestions that I have previously made for clothing to be worn on other islands, are equally forcible here, with the exception that one can purchase garments made in excellent style and of the very best English goods, for what seems to be a ridiculously small price. For several years past I have had all my summer suits made there, paying for a first-class article from thirteen to fifteen dollars complete, and for an evening dress suit twenty-five dollars. Lady friends who were with me, fairly revelled in the cheapness of goods. A first-class dressmaker would come and measure her customer at the hotel, bring back the costume complete without ever trying it on, and charge for an ordinary suit, four dollars, for one made of silk, or finer goods with any amount of trimming, six dollars. Of course these prices would not include linings or thread, both of which were purchased by the customer as cheaply as other goods. In these days of increasing prices from tariff vagaries, it is refreshing in the highest degree to be able to purchase a suit of ladies' gear complete for seven or eight dollars, and if upon arriving home changes are necessary to fit them to the reigning fashion, it is more than likely that the least of these will cost more than the original price of the costume.

The only thing that cannot be bought here is shoes, for English feet, both male and female, are larger by several sizes than American, and care must be taken to carry a sufficient supply of foot-gear to last.

There is nothing more beautiful in the world than the play of color over the western sea beneath a setting sun. At Barbados the only difficulty that artists find in interpreting it is to obtain from their color-

boxes tints sufficiently brilliant, and if they do succeed in even a moderate degree in representing the glory of these sunsets, they are sure to be charged with manufacturing in the most absurd manner, combinations that cannot be even dreamed of by those not fortunate enough to have seen them.

This island is a health resort in summer as well as in winter. Invalids from South America and from the neighboring islands, resort here for coolness in July and August, as we of the frozen North for genial warmth in winter months. The result is a constant study on the part of the inhabitants of the wants and needs of travelers, with an effect that is especially comforting to those who go there.

Medical men are thoroughly qualified, competent and courteous gentlemen, and will receive their colleagues from America with a warmth of hospitality that is refreshing to a stranger.

I noticed a few lepers in the streets of Bridgetown, and learned from my friend Dr. Archer, that owing to the careful and stringent sanitary regulations in force, with isolation of these unfortunates, that they have been almost banished from the island and driven from the public streets.

Travelers going to Barbados this winter will fare better than we did last, for extra steamers have been placed upon the lines, with better accommodations and greater comforts. The only warning that I can give to those who think of going there is, that no one of the islands, not even this one, is a fit place for rheumatism in any form, or for advanced lung disease.

FONTABELLE, BARBADOS, MARCH, 1890.

The Polyclinic.

MEDICO-CHIRURGICAL HOSPITAL NOTES.

IN a recent lecture to the class, Prof. Keen gave them the following for preparing chromic acid catgut ligatures:

R.—Aque 2000 parts.
Acid, carbolic 200 "
Acid, chromic I "

Then add as much catgut as carbolic acid, viz., 200 grains; soak forty-eight hours, and dry.

Prof. Keen said that ligatures prepared in this way were prevented from being too early absorbed.

In a case of eczema squamosum, treated at the clinic, Dr. Steltwagon recommended tar as a most important remedy, in the following proportion:

R.—Picis liquidæ f3j.
Sulphur ʒj.
Ung. simplicis f3j.

M.—Sig. To be rubbed in morning and evening.

Patient was also advised to keep the hands out of water, as water would tend to irritate the parts, and otherwise increase the trouble.

Dr. J. Solis-Cohen advised the following prescription in a case of irritability of the vocal cords from over-use:

R.—Tr. benzoini comp.,
Tr. opii camphor ʒʒ f3ss.
Aque ferv., q. s.

M.—Sig. Use as a gargle.

And direct the patient to use the vocal cords as little as possible.

Prof. Keen, in his lecture to the class on the anti-septic treatment, said that if instruments were boiled

for five minutes in a 1 per cent. solution of sodium carbonate, it would prevent their becoming corroded and rusted, which is likely to follow when boiled in pure water.

FOR WHOOPING-COUGH.

R.—Antipyrin,
Quinina sulphat ʒʒ ʒss.
Elix. glycyrrhizæ f3iv.

M.—S. f3j every two to four hours.

—Waugh.

CASE SIMULATING BRIGHT'S DISEASE.

Waugh presented a case which, from a cursory examination, looked like one of Bright's disease. She complained of lumbar pain, vesical irritability, short breath, and cedema of the ankles—the latter disappearing during the night. But her complexion was ruddy; her vision good; she had no history of headaches, nausea, vertigo, or cardiac disorder. The urine was not albuminous. Inquiry showed that she had had repeated attacks of rheumatism; and the urine was found to be highly charged with uric acid. The cedema of the ankles was accounted for by her weight and her occupation, which kept her standing for most of the time. She was directed to abstain from fluids and from nitrogenous food, and to take alkalies with saline laxatives.

ARISTOL FOR BURNS.

A severe burn occurred from scalding oil. The case was not seen for several hours, when three different applications had already been made to it. These were removed and an ointment applied, consisting of aristol in petrolatum, 20 grains to the ounce. In one week the dressings were removed. The healing had been perfect; not a drop of pus had formed, and the scalded surface was glazed.

—Waugh.

ERGOT IN CATARRHAL PNEUMONIA.

In a case of catarrhal pneumonia in an elderly woman, wine of ergot was given in drachm doses every four hours. The threatening symptoms subsided quickly, and recovery ensued.—Waugh.

In the Electro-therapeutical Department, conducted by Dr. W. H. Walling, much good work is being done. A few cases only can be cited.

TRANSVERSE MYELITIS.

This patient, referred by Prof. Waugh, was suffering from transverse myelitis, the bladder being paralyzed; the bowels totally inactive; with both limbs involved, the right being anæsthetic and the left partially paralyzed. A short course of galvanic applications restored the patient to comparative health and a restoration of lost functions, he returning to an active occupation.

SUPRA-ORBITAL NEURALGIA.

This patient, an old gentleman, was admitted to the hospital suffering from supra-orbital neuralgia, so intense in character that he could neither eat, talk, or swallow, the least movement of his jaws, or of the supra-orbital muscles giving intense pain. Before resecting the nerve, it was determined to try what electricity would do for him, all medical means having been exhausted in vain. Improvement began with the first application of electricity, and within ten days he was entirely relieved of all pain or discomfort.

POLYCLINIC HOSPITAL.

THE DIARRHŒA OF CONSTIPATION.

IN the course of his remarks on a case that was presented for treatment at the Medical Department of the Polyclinic, Prof. Solomon Solis-Cohen, alluded to the frequency of the condition, which has been called "the diarrhœa of constipation." The patients, as in the case before the class, frequently state that they have had chronic looseness of the bowels for many years. The immediate cause of seeking advice is usually paroxysmal pain, which may stimulate hepatic colic, or as in a case recently seen in private practice, may simulate renal colic. The so-called diarrhœic stools should be carefully examined, and the history carefully inquired into, with the minuteness of a legal cross-examination. The true facts will then be found at variance with the patient's statements. There will be much desire to go to stool rather than frequent passages; and the amount of fecal matter passed will be found to be very small. The passages are small, thin, serous, foul-smelling, sometimes bloody, usually containing much mucus. Scybala will occasionally be passed, usually with much pain and difficulty. They are commonly glazed with a glairy mucus, and often faintly blood stained. In other words there is a condition of irritation of the bowel, with insufficient evacuation of the contents. Frequent attempts at defecation, but little result. The paroxysmal pains are due to distension, traction and pressure. When the patient has been in the habit of taking opium mixtures to relieve the supposed diarrhœa, the abdomen may be found greatly distended from paralysis of the intestinal muscular layer. The percussion phenomena will be mingled tympany and dullness, the distribution of the sounds depending on the location of masses of feces in the bowel. Usually the ascending and transverse colon will be found filled, and the transverse colon may seem to be much dragged down. Pains in the chest may be caused by traction upon the diaphragm. Enlargement of the liver, or ascites, may be mistakenly diagnosed, unless care is taken to map out the dullness accurately, and not to be misled by the apparent fluctuation of the relaxed intestines. Headache, vertigo, languor, anorexia (sometimes boulimia) nausea, vomiting, are among the chronic or recurring symptoms, other than those already mentioned. The first thing in treatment is to thoroughly wash out the bowel. This may require several irrigations, supplemented by massage of the abdomen. When there is no absolute impaction, calomel may be given in single daily doses of five grains, with soda or aromatic powder, continued for two, three, or four days. Olive oil in large doses and castor oil may also be given by the mouth; or warmed and thrown as high as possible into the bowel an hour or two before the irrigation. After the bowel has been emptied a tonic-laxative pill should be prescribed for continuous use for long periods, with occasional resort to calomel, oil, and salines.

A good formula is as follows:

R.—Euonymin..... gr. ij.
Ext. ignatie..... gr. ss.
Ext. belladonna..... gr. ½.
Piperini..... gr. j.
M.—S: One pill three times a day, after meals.

The number of pills daily, or the sizes of the doses, may gradually be reduced as improvement is manifested. Resin of podophyllum, leptaudrin, iridin, and the like may be used with, or instead of, the

euonymin. Extract of cascara sagrada is very often useful. The dose is from two to five grains. The ignatia may be replaced by strychnine or nux vomica, the belladonna by hyoscyamus. The commonly used pill containing aloin or aloes is not often useful, and the hemorrhoidal condition present often counterindicates it. Ipecacuanha is often usefully combined with the other agents.

The diet should be carefully regulated. At first it should be restricted to milk (peptonized, or with digestive agents added), beef-tea as a stimulant, thin soups, coffee, and the like. After a little while, when the intestinal irritation and catarrh have subsided, meats and vegetables may be added. Bran bread and other substances intended to assist peristalsis by irritation should not be given. Laxative fruits may be eaten in moderation. Pastry, sweets, and other indigestibles are to be avoided. Plenty of water, preferably hot water, should be drunk. Enemata may be required from time to time, to wash out accumulations, and at first should be given daily, then on alternate days, then weekly, as a routine practice. Abdominal massage, and faradization of the intestines are of great service.

It is quite evident that treatment of the apparent diarrhœa by astringents and opiates is a mistake, and yet this practice is so common as to render it worth while to caution against the error, and to insist on careful examination of the patients. There are other cases of apparent diarrhœa and colic which may turn out to be something quite different on examination. "Walking typhoid fever" is familiar to all; but it is not as generally known as it ought to be, that serious and even fatal results have occurred in cases of perforating appendicitis and other inflammations in the neighborhood of the cœcum, as a consequence of neglect, due to insufficient inquiry into the case. We should never accept a patient's diagnosis, until our own investigations have proved it to be correct.

THE New Jersey Sanitary Association held its Sixteenth Annual Meeting in the Assembly Room of the State House, at Trenton, on Friday and Saturday, December 12 and 13. Papers were read on the following subjects:

The Use of Smoke in Testing House Drains, by Inspector P. L. Lippincott, of Asbury Park.

The Relation of Ground Water to the Health of a Community, by Col. George E. Waring, Jr., C. E., of Newport, R. I.

The Death-rate of Different Localities in New Jersey, by James Owen, C. E., of Montclair.

Annual Address, by the President, George P. Olcott, C. E., of Orange, on Sanitation in House Construction.

What We Do Not Know About the Climate of New Jersey, by Prof. John C. Smock, Ph. D., State Geologist.

Report of Committee on Stream Pollution. C. Phillips Bassett, C. E., of Newark, Chairman.

Deterioration of Water in Reservoirs and Conduits: Its Causes and Modes of Prevention, by Charles B. Brush, C. E., of Hoboken, and Geo. W. Rafter, Civil and Sanitary Engineer, Rochester, N. Y.

Physical Training, by Prof. Chas. H. Raymond, of Lawrenceville.

The Sewers of Trenton, by Prof. Rudolph Hering, C. E., of Philadelphia, Pa.

Discussion on Traps, opened by Ezra M. Hunt, M.D.

The Times and Register

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CHRISTMAS GREETINGS.

FOR ONCE THE TIMES AND REGISTER has relaxed from the customary sternness of medical journals and has donned Christmas greens and a Christmas spirit. During the past year its success—thanks to you, indulgent reader—has been so marked, and of late tokens of sincere appreciation have poured in upon us from so many sources, that we cannot resist the impulse to celebrate; and feel quite proud of our bright holiday dress.

We take this occasion to thank both our readers and contributors for their warm support, and to assure them of our well wishes for their success, and only wish we could stand without their doors and carol a hearty

"God rest ye, merrie gentlemen,
Let nothing you dismay."

With all due modesty, we would also state that if our readers are pleased with THE TIMES AND REGISTER now, they will be more than pleased as time rolls on; for we do not intend to stand still, but will constantly be carrying out plans of improvement and enlargement, so that we hope to be a valuable assistant to the country doctor, a scientific elucidator to the investigator, a reliable help to the city physician, and an upholder of the medical sciences to the entire profession—progressive, fearless, and truthful—we shall also truly be "a thing of beauty and a joy forever."

We trust our pardonable self-praise will be regarded charitably, due allowance being made for the effect of this joyous season upon our editorial staff, and we also trust that our readers will return our wishes for A Merry Christmas and A Happy New Year, and echo with us Tiny Tim's cry of "God bless us, every one."

MAGNETIC HEALING.

THAT inquisitive member of our editorial staff has been on the war path again. This time with the view of ascertaining something about magnetic healing. Dr. Fritz, of Arch street, Philadelphia, was the potent healer from whom the information was obtained. Dr. Fritz is very likely known to many of our readers by the modest advertisements he pleases to insert in Philadelphia's dailies, which frequently contain long lists of cases cured by him.

Our representative found him to be a large, fine-looking man, with a pair of keen eyes, gentlemanly address, of about fifty years of age.

Of course, we had to represent ourselves as a patient, and gave the symptoms of a severe case of "nothing at all," and then sought to draw the "doctor" out, which task was easily accomplished.

Dr. Fritz says he *always* cures, and *never* fails; although he frequently adds medicinal treatment to the magnetic. He confesses that he has no idea what magnetic healing is; "I simply do it, that's all."

Our recent interview with Christian Scientists led us to ask if his method was similar. "Yes," he said, "the results are all obtained in the same way; magnetic healing, hypnotism, Christian science, and electricity are all the same thing."

We know of a certain gynecologist of Philadelphia who would enthusiastically endorse this statement, but won't mention names.

"Do you hypnotise your patients?"

"No; I don't think you could call it hypnotism, although it amounts to the same thing. I don't put them to sleep, but heal them instantly."

"What method do you employ?"

"If the patient has rheumatism, I simply place my hand on the affected limb and ask if he feels pain. 'Yes,' is replied; then I do so—" and here Dr. Fritz frantically waved his hand in front of our representative's face—"and say, 'Throw away your crutches; the pain's gone; you're well.' And, sure enough, he is. Then I tell him to jump about, and stamp his feet, or otherwise use the limb violently, but no pain can be induced."

"To be sure," he added, "this condition may last only a few weeks; but two or three such treatments will produce a permanent cure."

"How do you account for such cures?"

"I don't account for them; I can't explain them; I only know I can do it. But I do not always use it, as few can afford to pay for it; and then it is very weakening, and exhausts me greatly."

"What are your charges?"

"Never less than \$10, and up to \$100."

"You give stage performances, do you not?"

"Yes; and have greater success in treating people on the stage than in private practice. In such a performance—I had forty-eight last fall—I ask all who wish to be treated to seats on the stage, and go from one to another and heal all. I do not need to ask their symptoms, or what ails them, but simply secure a statement of their troubles for the sake of the audience. I classify patients into *positive* and *negative*. If I go to a negative patient and, when questioning

him, see that he is doubtful or opposing, I will not attempt to heal him, but proceed to a positive or sensitive patient, heal him, and then return to the negative patient, and have no difficulty in healing him."

"Do you use no other treatment?"

"Well, if mechanical trouble exists, I remove the cause. For instance, while I can make the deafest person hear the ticking of a watch inside of five minutes, yet if there is a hard lump of wax in the ear, I will remove this first. Not long ago, at one of my performances, I had a woman brought to me with organic disease of the heart, so bad that she had to be assisted up the platform-steps by her husband. I merely layed my hand upon her breast and said: 'You are well, run up and down those stairs!' Her husband was scared to death when he heard me say this, but the woman obeyed and even ran up another flight of stairs, without the least painful results, and is a well woman to-day."

"You say," remarked our representative, "that your method is similar to 'Christian Science,' yet what I know of the latter is that they argue the non-existence of disease or evil."

"That is merely to effect the patient. What doctor does not lie to his patients? Why, d—— it, they all do; so do I. But I have been too open and honest, and were I to begin life over again, I would be dishonest—honest to myself, of course, but dishonest to others."

"This power—is it acquired or a gift?"

"It is a gift. When I first began to heal by laying on of hands, I knew nothing whatever about it, nor do I understand it now. Practice, however, has given me additional skill."

"You say, it is very fatiguing to you?"

"Yes; and in stage performances when I am healing other cases, such a power goes forth that the more sensitive cases can't stand it, even although I am not treating them, and get sick at their stomachs and have to leave the stage."

"Does the act of healing require any mental effort, or any exhibition of will-power on your part?"

"No more will-power or effort, than when I strike this table."

"How do you account for the fatigue?"

"I don't account for it. I don't understand what the power is, anyhow; all I know is that I can do it. I am not an investigator."

"You also say it is similar to hypnotism and electricity. What do you mean?"

"Well, the results are obtained in a similar manner; but in hypnotism only one man out of ten can be influenced, while magnetic healing is absolutely infallible in every case. Regarding electricity, we know what it does—but who knows what it is? It is a power, that's all we know about it. So it is with magnetic healing, it is a power, but even I who have practiced it for years, don't know what it is."

"Why is it, doctor, that you are looked upon as a quack by the profession?"

"Simply, because I don't conform with their limited ideas. But they are quacks themselves. Look at Dr. —, down the street, and then Professor —, and the great Dr. —, why they are worse quacks

than I am by far, and yet they are looked up to by the profession."

Since the gentlemen mentioned are subscribers to this journal, we will mercifully forbear mentioning names.

"Then," Dr. Fritz continued, "look at Brown-Séquard. He was looked upon as a light of the profession until he began to sell a quack-medicine; then he was denounced as a quack. Then, look at Koch! Why d—— it, he'll be called a quack, soon. But then, we are all cranks, all cranks!"

The outlook for the profession had grown so very black that our representative felt inclined to close the interview, feeling that he had obtained as much as the readers of THE TIMES AND REGISTER could bear at one dose; and this inclination became a firm conviction when he read the inscription of a placard over the doctor's desk, which read: "One dollar will be charged for consultations lasting over ten minutes."

Such is magnetic healing; or more correctly speaking, such it is not; and this brings back forcibly the closing lines in *The Hunting of the Snark*: "For the Snark was a Boojum, you see!" Although the poem sets out to tell what a Snark is, it neglects to inform the reader what a Boojum is, and, therefore, we are left in perplexing doubt as to what either animal actually is.

Annotations.

INFANT MORTALITY.

DR. WILLIAM M. CAPP, of Philadelphia, in a very interesting article on this subject, printed in the San Francisco *Evening Bulletin*, says:

The class of neglected and abandoned infants met with in foundling institutions is peculiarly disqualified for any prolonged struggle, for instance, especially against peculiarly adverse circumstances. They are often the offspring of vicious parents, and with tendencies to disease, and of deficient vitality. To these disadvantages are sometimes added positive neglect and exposure, the ill-effect of which may not be overcome by even the most assiduous subsequent care and attention. Beside, hospital attention to young infants can rarely be equal to the motherly attention of a well-ordered home. It should not, therefore, be surprising that the mortality rate in foundling establishments will be greater than in the general community.

In the official annual statistics of Paris, published in 1880, there were received in hospitals: In 1874, 2,171 foundlings, of whom about 35 per cent., or 758, died within twelve months; 1875, 1,720 foundlings, of whom about 40 per cent., or 694, died within twelve months; 1876, 1,648 foundlings, of whom about 34½ per cent., or 568, died within twelve months; 1877, 1,493 foundlings, of whom about 36 per cent., or 540, died within twelve months; 1878, 1,890 foundlings, of whom about 34 per cent., or 643, died within twelve months; and of those who succumbed during this series of years from 36 per cent. to 48 per cent. in the different years died in the first seven days; from 31 to 43 per cent. died in from eight to fifteen days, and 26 to 38 per cent. died in from fifteen to thirty days.

The "Austrian Statistical Hand-book," published in 1888, gives the following figures, which show such

a low average death rate that one is inclined to think they must be made up upon some plan different from that of the others quoted in this paper. Total number of foundlings in Austria for 1886 reported is 42,877, of whom 5,615 died (13.09 per cent.) Of those retained in hospital 6.71 per cent. died, and of those sent outside to the country 14.97 per cent. died. The averages for the years 1882 to 1885 inclusive are about the same as those given for 1886. It is fair to suppose that many sent from town died, but having been lost sight of, the death did not figure on the records of the institution.

In the Philadelphia Almshouse some years ago, the infant mortality rate was so high that it was mentioned only under the breath, but vigorous measures were instituted to better the conditions, and a decided improvement is manifest. Rigid hygienic rules were enforced, the quality of the food was looked after, and strict antisepsis, chiefly by thorough cleanliness of the feeding bottles and other utensils employed about the children, was insisted upon. Also all the women in the institution who were capable were retained as long as possible to act as wet nurses.

Official statistics upon these subjects are not gathered by the Government in this country.

THE MEDICAL INSTRUCTION OF TO-MORROW.

THE under-graduate colleges of America will, within ten years, abandon all their so-called didactic—or, as Professor Darling used to delight to call them, scholastic—lectures, and give only clinics, demonstrations, and laboratory work. Thus much they will eventually learn from the success of German methods of medical instruction, which are to be found in perfection in the post-graduate schools. Why a man should sit for three or four hours a day, in a badly ventilated room, to hear excellent medical and surgical essays, which he could much better learn from a text-book, or from the grinding of a quiz-master, is beyond enlightened comprehension. It is only the force of custom of a hundred years that continues this. Medicine and surgery can only be taught from the patient, the cadaver, and the laboratory. Long discourses, unillustrated by one of these, are a great waste of time and patience. If the organization of under-graduate schools cannot get beyond this, they had better not take up Professor Morrow's idea of seizing the post-graduate schools.

—*The Post-Graduate.*

MASSAGE.

THE tendencies of modern medical practice are toward physiological rather than medicinal treatment. Witness the growing popularity of massage, and of institutions like those of Drs. Ford, Patchen, and Stone, where the gymnastic training of the young is carried out in a scientific manner. How can any parent, who takes pride in the healthy and symmetrical appearance of his children, neglect the opportunities offered by these establishments? When physical development is taken from the rude hands of the illiterate trainer and directed by the skilled physician, there is no longer the danger existing under the old system. In fact, the difference is precisely that between quackery and science; between treatment by persons who are ignorant alike of the nature of the body, of its disease, and of the remedies employed, and intelligent management by the educated physician. As to the art of massage, since it has been devel-

oped by men of the great professional skill of Benjamin Lee, its possibilities are becoming recognized. In the treatment of nervous diseases, massage has inaugurated a new era.

THE TIMES AND REGISTER has always taken a deep interest in these matters, and takes pleasure in calling attention editorially to the establishments directed by these gentlemen.

TREATMENT OF TYPHOID FEVER BY HYDROTHERAPY.

DR. E. B. CHASSAGNE, of Kansas City, says: "The author does not exactly follow the directions of Brand, and prefers to use the warm bath gradually cooled down to 60°; it is to be cooled down by cold water poured in, and the water in the bath is kept in constant motion. The duration of the bath should be not under fifteen minutes, nor over thirty; in the majority of cases four baths in the twenty-four hours answer the purpose; in grave cases more baths will be necessary. I give a bath every time the temperature reaches 102°. The patient ought to take his time in leaving the bath, as he cannot take cold; thoracic complications are not produced by chilling, but produced by the fever; and statistics show that they are more frequent under chemical antipyretics than under the cold bath. If, on returning to bed, shivering takes place, the patient ought to be gently rubbed, and a hot bottle placed at his feet. In cases where intestinal hemorrhage appears, ice bags to abdomen instead of baths, and ergotin hypodermically in doses of 2 to 5 grains, according to the case.

Typhoid fever in children is not so fatal as in adults, and, by using hydrotherapeutic measures, we ought to save most every case.

In conclusion, I will say that chemical antipyretics ought to be left aside, as the only good they accomplish is that patients die with a normal temperature. The statistics show cold facts, and ignorance is the only excuse for not using hydrotherapeutic means.

—*Kansas City Medical Record.*

PERFECTED OBSTETRICS.

DR. ALFRED L. CARROLL, discussing "the influence of a more perfected obstetric science on the biological and social conditions of the race," has some very pertinent observations on the number of cases of "still-births" and the effect of the present conditions of obstetrical science. For instance, he says:

It is to be regretted that the registration of vital statistics is so imperfect in this country as to preclude any attempt to classify by months the mortality under one year; but the data, such as they are, indicate that, in the United States generally, about 25 per cent. of live-born children die during the first twelve-month.

It would not be unreasonable, perhaps, to assume that at least half of the deaths under one month are attributable to accidents in parturition, and that a large residuum of those occurring in the first year has a similar origin; but the admirable reports of Farr may enable us to go a step farther in the field of inference. The death-rate under one year per 10,000 births in England, for the three years ending with 1875, was 1,527. Of these, 95 were ascribed to the acute zymoses, 29 to "teething," 171 to diarrhoea, 263 to "lung diseases," 98 to tuberculosis, 128 to prematurity, 267 to "atrophy," 14 to "suffocation," and 251 to convulsions, leaving 211 "not stated."

The deaths from prematurity, "atrophy," and convulsions constitute nearly half of the mortality, all of the former and a considerable proportion of the latter two being referable to the time or act of parturition, and some of the pulmonary disorders having their predisposition, if not their origin, in atelectasis at birth. In Farr's March of an English Generation, based on the labor of over thirty years, he computes that the average deaths per million under one year will be 149,493, of which 30,637 will be from diseases of the nervous system, and 21,995 from respiratory maladies. West, taking a wider view of "nervous" disorders, ascribes to these 30.5 per cent. of all the deaths under one year, and to convulsions alone 73.3 per cent. of the "nervous system" mortality—equivalent to 33,421 to the million births. Nor is he any less cogent in his reasoning than in his statistics. The conclusions which he draws respecting the social conditions have the sound of true earnestness which is refreshing. Under this head he says: As regards social conditions, I have little to say beyond expressing the belief that misery rather than midwifery is responsible for most of the degradation which blots our vaunted civilization. It may be that in some cases such misery is the outcome of physical disability dating from birth or parturition, but in more instances it is the result of acquired vicious habits. Social statistics show that the numbers of murders, suicides, and other kinds of crime bear about the same proportion to population every year; but of the aetiology of criminality nothing can be positively affirmed. Even those who dogmatically ascribe all the ill-doings of the world to alcohol have still to find some antecedent factor, and to explain why the vast majority of consumers of alcoholic beverages refrain from crime. Inebriety is often the excitant, but the predisposition must be sought behind it. "*In vino veritas*" has a wider philosophical meaning than they who quote it ordinarily wot of.

The vexed question of heredity (not so much of disease as of proclivity to disease) has little relation to obstetrics, save as it has led some enthusiasts to imagine an impossible prophylaxis by forbidding the marriage of physically, mentally, or morally unhealthy persons, and in this way diminishing obstetric practice, except in illegitimate births; and it is doubtful if anything but a destructively retrogressive midwifery or an increasing prevalence of oophorectomy can materially reduce hereditary morbidity, since delicate, and especially consumptive, women seem to be more apt to conceive and less likely to miscarry than their more robust sisters. As a "glittering generality" it may be asserted that every obstetric advance which saves mothers from invalidism and children from incapacity for future effort must promote the social condition of the race, but politico-economic rules and the inexorable operation of natural laws will probably always overshadow in this respect the influence of medical science, or even of Congressional legislation.

A NUMBER of well-known physicians met last Tuesday evening, at 1403 Locust street, and organized a new club. Dr. O'Hara presided, and P. J. Martin acted as Secretary. The new organization was named the Ambrose Pare Club, after the famous French surgeon of that name. Dr. L. Flick was elected President, and Dr. P. J. Martin, Secretary. Dr. J. Healy, Dr. Prendergast, Dr. C. J. Hoben, Dr. L. F. Flick, Dr. M. O'Hara, Dr. Martin, Dr. T. S. Crowley, Dr. J. H. Wallis, and Dr. Strittmatter were elected as the Board of Directors.

Letters to the Editor.

A CASE OF DIAGNOSIS.

BESSIE H., aged sixteen, American, consulted me about what she supposed was a spinal trouble, as she had treated with one doctor for two years, with only temporary relief, and he sent her to the hospital for treatment, telling her she would most probably have to wear a plaster of Paris jacket, all of which not only worried the girl herself, but also the mother and older sister, who accompanied her on her first visit to the hospital. After questioning her thoroughly, I made an examination, and was much surprised at not being able to find any spinal trouble at all. Instead of there being any curvature I found the spinal column as straight as any. Not considering myself infallible, I called another doctor in to see the case with me, and asked him if he could detect any curvature or other spinal trouble. After thoroughly examining the case, he said he could find no trouble whatever with the spinal column. That being eliminated, I then began searching for the real cause of complaint, and found she was suffering from periostitis of the lower margin and angle of the right scapula, the same existing on the third and fourth ribs, anteriorly; both places were very sensitive to external pressure, and each pressure, unless exceedingly tender, would cause her pain. Upon further inquiry I found that for a year or more it had been her custom to carry to and from school, daily, from twelve to sixteen books, which were placed in a double-ended bag, such as the children now use for that purpose; this was invariably carried on the same shoulder. She also informed me that the teacher forbade their leaving any books at school, even during the noon-hour, and as she went home during that time, it necessitated her taking her books also. She lived ten squares from the school, and thus went over that distance four times daily, which would be equal to her carrying the said books four miles each day, which also caused her right shoulder to be somewhat lower than its companion on the opposite side. The patient's health was fairly good, though there was a bad family history, phthisis being in the family. I began a treatment that day, which was not changed for three months. The result was a complete cure. The last time I saw her, she looked the picture of health, and her sister said she was now gay and cheerful at home, and did not seem like the same girl.

DR. J. R. WALN.

PHILADELPHIA, December 11, 1890.

Book Notices.

THE PHYSICIAN'S VISITING LIST FOR 1891. Fortieth year of publication. Philadelphia: P. Blakiston, Son & Co., 1012 Walnut street.

This list contains all the really useful matter to be found in any of these books, and is still not so large as to bulge out the pockets inconveniently. We do not see how it could be improved.

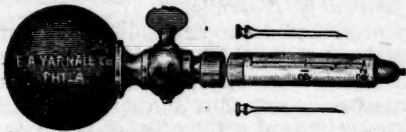
THE MEDICAL BULLETIN VISITING LIST, OR PHYSICIAN'S CALL RECORD. F. A. Davis, Publisher.

This list differs from others chiefly in that the name has to be entered but once a month; short leaves being inserted with the days upon them, one week on each. This is quite a convenience, economizing labor and saving bulk.

New Instruments.

KOCH'S HYPODERMIC SYRINGE.

WE are in receipt of a Koch's hypodermic syringe, such as is used by him for his inoculation of the lymph for tuberculosis. The illustration represents the instrument so well as to require little additional description. All the parts are easily detachable, and can easily be kept aseptic. In use, the stop cock is closed, and the glass tube removed and filled; then the needle is attached, the bulb replaced, the stop-cock opened, when, by pressure on the bulb, the fluid may be readily forced out through the needle.



The absence of piston, screws, and packing aid greatly in keeping the instrument clean,

and, apart from its use for injecting the lymph, it forms an almost ideal hypodermic syringe.

The instrument is manufactured by Messrs. E. A. Yarnall & Co., of Philadelphia, and we cannot refrain from complimenting them for their enterprise, for they placed the syringe in the hands of the profession simultaneously with the arrival of the lymph in this country. Such zeal deserves recognition and reward from the profession.

The Medical Digest.

FRENCH NOTES.

By A. E. ROUSSEL, M.D.

ONE of the daily newspapers of Berlin, in speaking of Koch's communication proposes to render the examination of the lungs obligatory, by means of a law analogous to that of vaccination. At certain determined periods each person shall be compelled to be officially ausculted, an examination made of his sputa, and, if there be sufficient cause, to be treated, so that his fellow-citizens shall be protected from any tuberculous contagion on his part.

LATENT CANCER OF THE STOMACH.—M. Siredey mentions that an old woman entered the hospital for dyspepsia, with weakness of the legs, but with no signs of cancer, and otherwise in apparently good health. It is true a tumor was noticed in the epigastrium, but that was all, and besides the appetite was good. Death followed after a very short period of vomiting and emaciation. At the autopsy we found a cancer of the pylorus extending over the great curvature; the pylorus would hardly admit of the passage of a small sound.

—*La Médecine Moderne.*

MORTALITY FROM HYSTERECTOMY.—M. Terrier reports his results to the *Société de Chirurgie*. By the extra-peritoneal method: In 1883, 2 operations, 2 cures; in 1884, 2 operations, 1 death by peritonitis; in 1885, 5 operations, 1 cure, 4 deaths, of which 3 are from peritonitis and 1 by internal strangulation; in 1886, 6 operations, 3 cures, 3 deaths, 1 from hemorrhage, 1 acute peritonitis, and 1 chronic peritonitis; in 1887, 8 operations, 4 cures, 4 deaths, of which 3 are from peritonitis; in 1888, 5 operations, 5 cures; in 1889, 7 operations, 2 deaths, 1 by hemorrhage, the other by internal strangulation; in 1890, 3 operations, 1 death. Total: 38 operations, 23 cures and 15 deaths.

The mortality of hysterectomy by the extra-peritoneal method is 39.47 per 100.

If we divide the 8 years into 2 periods of 4 years, we find that the mortality in the first period is nearly 50 per 100, while in the second period it is reduced 30 per 100.—*La Médecine Moderne.*

TUBERCULAR PERITONITIS AND ITS CURE BY LAPAROTOMY (König).—Since 1884, when König published his first article on the treatment of tubercular peritonitis by operation, he has collected 131 observations, of which 14 are personal. Of this total, there were 120 women and 11 men, which would seem to prove that numerous operations have been due to errors in diagnosis. Of the 131 cases operated upon, 24 were lost sight of after the operation; 23 were ameliorated, and 84 cured (65 per cent.); some of the cures have been maintained for several years, and he can claim a definite cure for one-fourth of those operated upon; the operative mortality has been 3 per cent.

The mode of intervention has been most variable: simple laparotomy with evacuation of liquid, incision with antiseptic lavage, removal of affected organs, and curetage of tubercular cysts, circumscribed, etc. The employment of antiseptics has had no influence whatever on the result. Cures were obtained in all forms of tubercular peritonitis (serous, suppurating, diffuse, cystic, etc.), and even when the lung and other organs were complicated. According to König, circumscribed intestinal tuberculosis is, in the majority of cases, the cause of tubercular peritonitis. We do not know as yet why, after a simple laparotomy with evacuation of liquid, the intestinal lesion tends to spontaneous recovery; but one fact remains decidedly demonstrated, and that is the frequent and absolute cure of peritonitis by means of operative intervention.

—*Revue de Thérapeutique.*

TREATMENT OF DIPHTHERIA BY IODIDE OF POTASSIUM (S. Zinenko).—The author has obtained very encouraging results by the internal administration of iodide of potassium in diphtheria. It is administered to adults in doses as high as 60 grains a day; children aged from one to fourteen years are given, each day, twice as many grains as they have years. The remedy is continued until the appearance of symptoms of iodism, which is generally noticed from the second to the fourth day of the disease. In case of cardiac weakness, tonic treatment is given at the same time. The author uses neither applications nor cauterization to the throat, as he considers them both irritant and useless. On the other hand he employs the atomizer with a solution of boric or salicylic acid of from two to three per cent. The same is also to be used as a gargle. With children he uses lavage of the pharynx, according to the method of Dr. Stegenski. All the patients receive frictions of mercurial ointment in the region of the sub-maxillary glands (22 grains, twice daily). Toward the end of the treatment, hydrochlorate of quinine is given for its tonic effect. This method has been applied in all to 28 persons. Some of the patients died. At the same time, in another service of the hospital, where the patients are treated by other methods, 16 deaths occurred out of 29 cases. In another hospital, where the hygienic surroundings are better than in the service of the author, during the same epidemic, the mortality was 50 per 100.—*Bulletin Général de Thérapeutique.*

THE Italian Minister of the Interior has forbidden the use of Koch's lymph, except in the hospital.

Medical News and Miscellany.

TEN THOUSAND DOLLARS' worth of oleomargarine has been seized in Pittsburgh stores, where it was being sold as butter.

FIFTY persons of both sexes in Liverpool have formed a Mahometan congregation. It is thought that this faith may become popular in England.

GAUTEMALA has been invaded by a worse enemy than the Salvadoreans. Small-pox has entered the Central American republic, and has killed 1,200 persons in seven weeks. Physicians are badly needed.

AN alleged analysis of Koch's remedy is cabled to the daily press, stating the components to be: Ptomaines from tubercle cultures, cyanide of gold, and glycerine. As to the cyanide, this is not consistent with Koch's statement, that in three weeks the dose must be increased to five hundred times that first employed. Cyanide of gold is not an agent to be used in any such manner, unless the first dose is infinitesimal.

THE LYMPH AT BALTIMORE.—There are now nine patients at the Johns Hopkins Hospital inoculated with Koch's lymph. Owing to the fact that sufficient time has not yet elapsed, no effect is observed except the usual pain in the back, and desire to cough. The subjects for the experiment were selected with great care, and what are known as free patients. There are many wealthy patients who are waiting to be treated, if the operation proves successful. A new supply of lymph is expected next week.

ALMOST in the exact geographical center of Wyoming is a mountain of solid hematite iron ore, more than a mile wide, and over two miles in length. Besides the iron, the mountain contains lignite coal enough to warm the entire world for a century, a dozen dried-up lakes of soda, where the soda is deposited to the depth of over 300 feet, some of the lakes being over 600 acres in extent. In the mountain adjoining there is a petroleum basin larger than those of Pennsylvania and West Virginia combined. Out of some of the springs pure, rectified coal oil is trickling at the rate of twenty or thirty barrels per day.—*Star*.

The lamp-tree probably grows on the mountain slopes; while the Indian residents are a match for anybody.

LADY DOCTORS AT A DISCOUNT.—The native women frequenting the Balrampur Hospital, Lucknow, are so much behind the age that they elect the services of male in preference to female doctors. This is what Dr. Rice, the Inspector General of Civil Hospitals, says on the subject: "With regard to the 934 major surgical operations done in the female hospitals; it is but right that I should state that the large majority of them have been done by the Civil or Assistant Surgeons, and this is right generally. The greater part of them are of a nature unconnected with the sex of the sufferer. I have, myself, seen women insist that the operations should be done by the male doctor; and not only that, but that they should be done in the male hospital, so as to make sure of his operating. The principle of management is that, as far as this is concerned, every woman shall be left a free agent in the selection of the particular division of the hospital in which she shall be treated."

—*Indian Medical Gazette*.

WITH the object of advancing scientific study and settling a now mooted question, Dr. J. B. Mattison, of Brooklyn, offers a prize of \$400 for the best paper on Opium Addiction as Related to Renal Disease, based upon these queries:

Will the habitual use of opium, in any form, produce organic renal disease?

If so, what lesion is most likely?

What is the rationale?

The contest is to be open for two years from December 1, 1890, to either sex, and any school or language.

The prize paper is to belong to the American Association for the Cure of Inebriety, and be published in a New York medical journal, *Brooklyn Medical Journal*, and *Journal of Inebriety*.

Other papers presented are to be published in some leading medical journal, as their authors may select.

All papers are to be in possession of the Chairman of Award Committee on or before January 1, 1893.

The Committee of Award will consist of Dr. Alfred L. Loomis, President New York Academy of Medicine, Chairman; Drs. H. F. Formad, Philadelphia; Ezra H. Wilson, Brooklyn; Geo. F. Shrady, and Jos. H. Raymond, editor *Brooklyn Medical Journal*.

PATENTS, ETC., on medical subjects, issued December 9, 1890:

Nursing-bottle holder.....J. von Huppmann-VallbellaNew York, N. Y.
Forceps for dental wedges.....G. J. Davison.....Richmond, Va.
Surgical bandage winder.....W. Gilfillan.....Steinway, N. Y.
Vaginal syringe.....J. R. Trott.....Morrisonville, Ill.
Bleaching hair.....F. G. Wiseloge.....Indianapolis, Ind.

TRADE-MARKS.

Medicinal cure for gonorrhoea (The words "Stop it sure" with the word "shure" arranged across the face of the words "Stop it").....B. D. Bell.....Lexington, Ky.
Cough-syrup. (The words "Persian Cough-Syrup").....Murphy Bros.....Jamestown, O.
Topical remedy for the cure of corns and other callosities. (The word "Cornease").....The Clark Johnson Medicine Co.....New York, N. Y.

Remedy for diseases of the blood, stomach, and kidneys. (The words "Dr. Clark Johnson's Indian Blood Syrup," and the representation of an Indian).....The Clark Johnson Medicine Co.....New York, N. Y.
Remedy for bronchial affections. (A monogram of the letters "J. R.").....J. Easton.....Brockville, Canada.
External application for the cure of headache. (The words "Hedake Kolone").....J. H. Lakin.....Boston, Mass.
Condition powder to cure hog-cholera. (The representation of a hog bearing the words "Van-Cholera Cure" and the figure of a sickle).....A. J. Van Syckle.....St. Mary's, Kan.

Medical preparations for lung diseases. (The pictorial representation of a globe surrounded by a band studded with bottles, in imitation of handles of a steering-wheel; two sailor boys above the globe at the wheel; the whole floating within clouds) F. Leitch.....Turtle Point, Pa.

CHARLES J. GOOCH, *Patent Attorney*.

LOCK BOX 76, WASHINGTON, D. C.

TO CONTRIBUTORS AND CORRESPONDENTS.

ALL articles to be published under the head of original matter must be contributed to this journal alone, to insure their acceptance; each article must be accompanied by a note stating the conditions under which the author desires its insertion, and whether he wishes any reprints of the same.

Letters and communications, whether intended for publication or not, must contain the writer's name and address, not necessarily for publication, however. Letters asking for information will be answered privately or through the columns of the journal, according to their nature and the wish of the writers.

The secretaries of the various medical societies will confer a favor by sending us the dates of meetings, orders of exercises, and other matters of special interest connected therewith. Notifications, news, clippings, and marked newspaper items, relating to medical matters, personal, scientific, or public, will be thankfully received and published as space allows.

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IN BRIGHT'S DISEASE, OF THE KIDNEYS, THE GOUTY DIATHESIS, ETC., ETC.

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A REMEDY FOR

DIPHTHERIA; CROUP; SORE THROAT, AND ALL INFLAMMATORY DISEASES OF THE THROAT.

OPINION OF THE PROFESSION.

Dr. Geo. B. Hope, Surgeon Metropolitan Throat Hospital, Professor Diseases of Throat, University of Vermont, writes in an article headed "Some Clinical Features of Diphtheria, and the treatment by Peroxide of Hydrogen" (*N. Y. Medical Record*, October 18, 1888). Extract :

"... On account of their poisonous or irritant nature the active germicides have a utility limited particularly to surface or open wound applications, and their free use in reaching diphtheritic formations in the mouth or throat, particularly in children, is, unfortunately, not within the range of systematic treatment. In Peroxide of Hydrogen, however, it is confidently believed will be found, if not a specific, at least the most efficient topical agent in destroying the contagious element and limiting the spread of its formation, and at the same time a remedy which may be employed in the most thorough manner without dread of producing any vicious constitutional effect."

"In all the cases treated (at the Metropolitan Throat Hospital), a fresh, standard Marchand preparation of fifteen volumes was that on which the experience of the writer has been based."

Dr. E. R. Squibb, of Brooklyn, writes as follows in an article headed "On the Medical Uses of Hydrogen Peroxide" (*Gaillard's Medical Journal*, March, 1890, p. 307), read before the Kings County Medical Association, February 5, 1890 :

"Throughout the discussion upon diphtheria very little has been said of the use of the Peroxide of Hydrogen, or hydrogen dioxide; yet it is perhaps the most powerful of all disinfectants and antiseptics, acting both chemically and mechanically upon all excretions

and secretions, so as to thoroughly change their character and reactions instantly. The few physicians who have used it in such diseases as diphtheria, scarlatina, smallpox, and upon all diseased surfaces, whether of skin or mucous membrane, have uniformly spoken well of it so far as this writer knows, and perhaps the reason why it is not more used is that it is so little known and its nature and action so little understood."

"Now, if diphtheria be at first a local disease, and be auto-infectious; that is, if it be propagated to the general organism by a contagious virus located about the tonsils, and if this virus be, as it really is, an albuminoid substance, it may and will be destroyed by this agent upon a sufficient and a sufficiently repeated contact."

"A child's nostrils, pharynx and mouth may be flooded every two or three hours, or oftener, from a proper spray apparatus with a two volume solution without force, and with very little discomfort; and any solution which finds its way into the larynx or stomach is beneficial rather than harmful, and thus the effect of corrosive sublimate is obtained without its risks or dangers."

Further on Dr. Squibb mentions that CHARLES MARCHAND is one of the oldest and best makers of Peroxide of Hydrogen, and one who supplies it to all parts of the country.

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WHILE the annual supply of quinine for the whole world is estimated at about 6,000,000 ounces, more than 3,000,000 ounces are consumed in the United States.

CHEAP ENOUGH.—"If you haven't brought home a canary bird! You're the most extravagant person, John Smith—"
"But, my dear, I bought this for a song."—*Boston Post.*

LADY: "Dear, dear, here is some doctor who took a woman's liver out. I wonder how he did it?"

High School Daughter: "I don't know. I am not acquainted with 'Doxology.'"

WIFE OF PHYSICIAN: "I see here in *The Constitution* a reference to 'Woman's Serious Side.' Which side is it, right or left?"

Husband: "From my medical journals I should think it was her inside."

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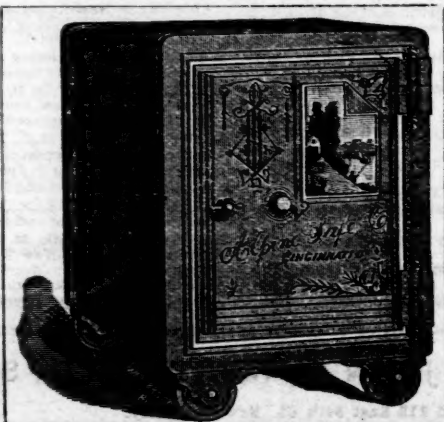
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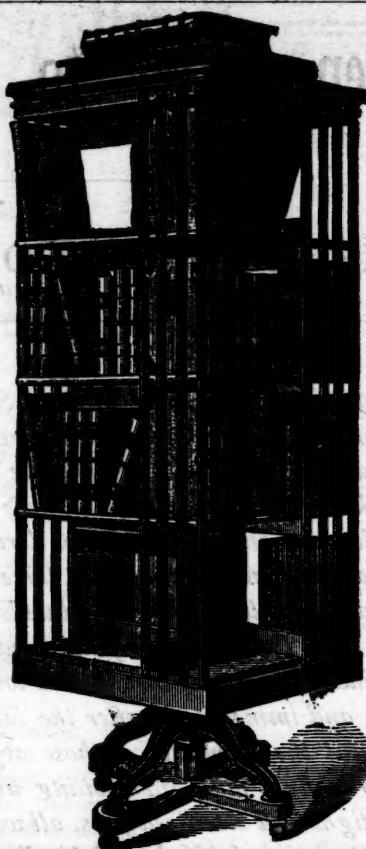
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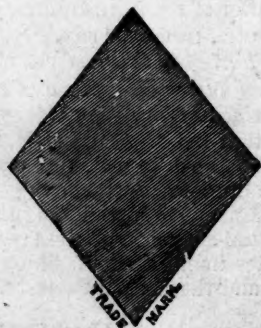
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